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<h2 style="margin: 0;">CONDITION OF RENTAL PROPERTY CHECKLIST</h2>
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Instructions: Tenant(s) complete(s) this checklist within seven (7) days of moving in and, Tenant(s) and Landlord review property and completed checklist together and mutually agree on the condition of the property upon move-in by signing this form. Each party keeps a copy of signed checklist. Tenant(s) and Landlord also use the move-in checklist during the pre-move out inspection, and again when determining if any of the Tenant’s deposit will be retained for cleaning or repairs after move-out.

BE SPECIFIC and DETAILED when filling out the checklist.

PROPERTY ADDRESS: 566 Cherry St, Mosinee WI 54455 UNIT NUMBER: _____
 LANDLORD: _____ TENANT: _____
 TENANT: _____ TENANT: _____

	CONDITION ON ARRIVAL	CONDITION ON DEPARTURE
LIVING ROOM		
Floor & Floor Covering		
Walls & Ceiling		
Door(s)		
Door Lock(s) & Hardware		
Lighting Fixture(s)		
Window(s) & Screen(s)		
Window Covering(s)		
Smoke Detector		
Heat Register		
Other		

	CONDITION ON ARRIVAL	CONDITION ON DEPARTURE
KITCHEN		
Floor & Floor Covering		
Walls & Ceiling		
Door(s)		
Door Lock(s) & Hardware		
Lighting Fixture(s)		
Window(s) & Screen(s)		
Window Covering(s)		
Smoke Detector		
Cabinets		
Counters		
Stove/Oven/Range Hood		
Refrigerator		
Dishwasher		
Sink(s) & Plumbing		
Garbage Disposal		
Heat Register		
Other		

	CONDITION ON ARRIVAL	CONDITION ON DEPARTURE
DINING ROOM		
Floor & Floor Covering		

	CONDITION ON ARRIVAL	CONDITION ON DEPARTURE
Walls & Ceiling		
Door(s)		
Door Lock(s) & Hardware		
Lighting Fixture(s)		
Window(s) & Screen(s)		
Window Covering(s)		
Other		
Other		

	CONDITION ON ARRIVAL	CONDITION ON DEPARTURE
BATHROOM		
Floor & Floor Covering		
Walls & Ceiling		
Door(s)		
Door Lock(s) & Hardware		
Lighting Fixture(s)		
Counters & Surface		
Bathtub/Shower		
Window(s) & Screen(s)		
Window Covering(s)		
Toilet		
Sink & Plumbing		

	CONDITION ON ARRIVAL	CONDITION ON DEPARTURE
Light Fixtures		
Other		
Other		

	CONDITION ON ARRIVAL	CONDITION ON DEPARTURE
BEDROOM #1		
Floor & Floor Covering		
Walls & Ceiling		
Door(s)		
Door Lock(s) & Hardware		
Window(s) & Screen(s)		
Window Covering(s)		
Closet, including doors & tracks		
Smoke Detector		
Heat Register		
Other		

	CONDITION ON ARRIVAL	CONDITION ON DEPARTURE
BEDROOM #2		
Floor & Floor Covering		
Walls & Ceiling		
Door, and Hardware		

	CONDITION ON ARRIVAL	CONDITION ON DEPARTURE
Window(s) & Screen(s)		
Window Covering(s)		
Closet, including doors & tracks		
Smoke Detector		
Other		
Other		

	CONDITION ON ARRIVAL	CONDITION ON DEPARTURE
OTHER		
Heating System		
Air Conditioning		
Hallway Walls, Ceiling, & Trim		
Patio/Deck		
Other		
# of Keys Received for Unit:		
# of Keys Received for Storage Unit:		
# of Keys Received for Garage:		

# of Garage Openers Received:		
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Tenants acknowledge that all smoke detectors were tested in their presence, were found to be in working order, and that the testing procedure was explained to them. Tenants agree to test all detectors at least once a month, and to report any problems to Landlord in writing.

Comments:

MOVE-IN INSPECTION DATE: _____ MOVE-OUT INSPECTION DATE: _____

LANDLORD: _____ LANDLORD: _____

TENANT: _____ TENANT: _____

TENANT: _____ TENANT: _____

TENANT: _____ TENANT: _____

TENANT: _____ TENANT: _____

