

## Move-In/Out Condition Report



This Move-in/Move-Out Condition Report is part of the Lease Agreement dated \_\_\_\_/\_\_\_\_/\_\_\_\_ between \_\_\_\_\_ (Tenant) and \_\_\_\_\_ (Landlord) for the property located at 400 N LaSalle Dr. #3008 Chicago IL.

The Landlord and Tenant have each inspected the property listed above. Tenant understands that this Condition Report is a part of their Lease Agreement and will used to document the condition of the dwelling upon gaining occupancy and upon vacating.

	Arrival Condition	Departure Condition
<b>Living Room</b>		
Floor		
Walls and Ceiling		
Window(s)/Hardware		
Window Covering(s)		
Lighting Fixture(s)		
Door/Hardware		
Heating & A/C		
Outlets/Switches		
Sprinkler Head(s)		
Other		

	Arrival Condition	Departure Condition
<b>Kitchen</b>		
Floors		
Walls and Ceiling/Caulking		
Lighting Fixture(s)		
Outlets/Switches		
Sprinkler Head(s)		
Cabinets/Hardware		
Refrigerator & Icemaker		
Stove/Oven		
Vent		

Microwave		
Dishwasher		
Sink/Fixtures/Plumbing		
Counter		
Garbage Disposal		
Other		

Arrival Condition

Departure Condition

<b>Laundry</b>		
Washer/Dryer		
Dryer Vent		
Outlet/Switches		
Light Fixture		
Other		

Arrival Condition

Departure Condition

<b>Bathroom</b>		
Floors		
Walls and Ceiling/Caulking		
Lighting Fixture(s)		
Door/Hardware		
Outlets/Switches		
Cabinet/Hardware		
Counter Surfaces		
Sink/Fixtures/Plumbing		
Bathtub/Shower/Fixtures		
Toilet		
Vent		
Sprinkler Head(s)		
Towel bar(s)		
Other		

Arrival Condition

Departure Condition

<b>Bedroom</b>		
Floor and Floor Covering		
Walls and Ceiling		
Window(s)		
Window Covering(s)		
Lighting Fixture(s)		

Door(s)/Hardware		
Heating & A/C		
Outlets/Switches		
Sprinkler Head(s)		
Closet		
Electric Panel		
Other		

Arrival Condition

Departure Condition

<b>Entry and Hallway</b>		
Walls and Ceiling		
Light Fixture(s)		
Outlets/Switches		
Sprinkler Head(s)		
Closet		
Other		

Arrival Condition

Departure Condition

<b>Other</b>		
Balcony		
# of Keys Received:	Door ___ Mailbox ___ Storage ___	Door ___ Mailbox ___ Storage ___
# of Key-fobs Received:	Fob ___	Fob ___
Other		

**Comments:**

*Move-in Inspection*

*Move-Out Inspection*

Landlord \_\_\_\_\_ Landlord \_\_\_\_\_

Tenant \_\_\_\_\_ Tenant \_\_\_\_\_

Tenant \_\_\_\_\_ Tenant \_\_\_\_\_

Date \_\_\_\_\_ Date \_\_\_\_\_