EXHIBIT C – PROPERTY CONDITION & MOVE-IN INSPECTION FORM

Property:
Tenant(s):
Lease Beginning Date:

Room / Item	Move-In Condition & Notes Completed by Tenant	Move-Out Condition & Notes Completed by Manager

GENERAL NOTES

Are the Smoke Alarms in Working Order? YES / NO
If NO please explain:_____
Are Smoke Alarms in each Bedroom, Kitchen, Hallway, common area room with Fireplace, common area on same level as kitchen? YES / NO
If NO please explain:_____
Is there a Carbon Monoxide Detectors in the House?

Move-In Inspection Completed By:

Tenant _____ Date of Inspection_____

Print Name _____

---------- **OFFICE INSTRUCTIONS** ----------

Move-In Inspection Received By:

Property Manager_____ Date of Inspection_____

Print Name _____

Move-Out Inspection Completed By:

Property Manager_____ Date of Inspection_____

Print Name _____