TENANT UNIT INSPECTION CHECKLIST

UNIT#			DATE	MOVE-II	V		ANNUAL
Acceptable?	Υ	N	comment	Acceptable?	Υ	TN	comment
Entire Unit				Kitchen			
Smoke				Wall/interior		T	
detectors		_		doors] []
Doors and locks				Ceiling			
Windows				Floors		T	
/screens					Ш] [
Heating/air				Electric			
conditioning				fixtures/outlets][[
Ventilation		l		Stove			
/air quality					L	<u> L</u>	
Access to fire	_			Refrigerator	_	╢	_
escape	Щ	Ш			L	<u> </u>	
Free of		_		Sink	_	╢┍	_
vermin/rodents	Ш	Ш		D. 1/D. 1	L	<u> L</u>	
Other	_			Disposal/Trash	_	, ,	_
T D	Ш	Ш		Container	누	∦╞	
Living Room				Cabinets	L	J L	
Wall/interior				Countertops	_	┧┌	٦ ا
doors		H		Other	누	╢┝	
Ceiling	믬	H		Bedroom	ᆫ	4 -	
Floors	Ш	Ш		Wall/interior		+	
Electric		П		1	_	ılr	ا ا
fixtures/outlets Other	믐	님		doors Ceiling	누	∦누	<u></u>
	ш	Ш		Floors	누	╫╞	1
Dining area Wall/interior				Electric		<u> </u>	
				fixtures/outlets		ılr	۱ ا
doors Ceiling	Η	片		Other	누	╫╞	
Floors	ㅐ	H		Bedroom		4 -	
Electric		ш		Wall/interior		+	
fixtures/outlets				doors	_	ılr	ا ا
Other	H	H		Ceiling	十	╫┾	
Bathroom				Floors	十	╫┾	1
Wall/interior				Electric		╫┺	
doors	П			fixtures/outlets		ılг	ا ا
Ceiling	Ħ	H		Other	$\overline{}$	ilit	
Floors	Ħ	Ħ		Bedroom	_	1	
Electric				Wall/interior		T	
fixtures/outlets				doors	П	1 r	7
Working toilet	П			Ceiling	Ī		
Lavatory				Floors		T	
(hot/cold water)							
Tub/Shower				Electric			
(hot/cold water)				fixtures/outlets			
Other			- Services	Other			
Miscellaneous				Comments			
			last at				
]						
Manager Signature date							
TENANT SIGNATURE		_				-	DATE
REQUIRED AT MOVE-	ΙN					_	