



OTB
INVESTMENTS
INC.

Move-in/ Move-out Inspection Checklist

Tenant(s) Name:

Property Address:

| Area/Item | Condition | | Est. Repair Cost |
|---|-----------|----------|------------------|
| | Move-In | Move-Out | |
| KITCHEN | | | |
| Floors & Floor coverings | | | |
| Walls & Ceilings | | | |
| Windows, Locks & Screens | | | |
| Doors, Knobs & Locks | | | |
| Light Fixtures & Light Bulbs | | | |
| Cabinets, Cupboard Shelves & Drawers | | | |
| Countertops | | | |
| Sinks, Stoppers, Faucets, Drains & Plumbing | | | |
| Dishwasher | | | |
| Garbage Disposal | | | |
| Trash Compactor | | | |
| STOVE & OVEN | | | |
| Outside | | | |
| Burners | | | |
| Drip Pans | | | |
| Hood Vent | | | |
| Timer & Controls | | | |
| Broiler Pan | | | |
| Lighting | | | |
| REFRIGERATOR | | | |
| Outside | | | |
| Inside | | | |
| LAUNDRY FACILITY | | | |
| Washer | | | |
| Dryer | | | |
| Door, Knobs, Closet & Shelves | | | |
| DINING ROOM | | | |
| Floors & Floor Coverings | | | |
| Walls & ceilings | | | |
| Windows, Locks & Screens | | | |
| Window Coverings | | | |
| Doors & Locks | | | |
| Light Fixtures & Light Bulbs | | | |
| Closet & Shelves | | | |
| FLEX/OTHER ROOM | | | |
| Floors & Floor Coverings | | | |
| Walls & ceilings | | | |
| Windows, Locks & Screens | | | |
| Window Coverings | | | |
| Doors, Knobs & Locks | | | |
| Light Fixtures & Light Bulbs | | | |
| Closet & Shelves | | | |

| HALLWAY & STAIRS | | | |
|---|--|--|--|
| Floors & Floor Coverings | | | |
| Walls & ceilings | | | |
| Windows, Locks & Screens | | | |
| Window Coverings | | | |
| Doors & Locks | | | |
| Light Fixtures & Light Bulbs | | | |
| Closet & Shelves | | | |
| STORAGE ROOM | | | |
| Exterior | | | |
| Interior Attic | | | |
| Basement | | | |
| BATHROOMS | | | |
| Floors & Floor Coverings | | | |
| Walls & Ceilings | | | |
| Tile & Grout | | | |
| Windows, Locks & Screens | | | |
| Doors, Knobs & Locks | | | |
| Window Coverings | | | |
| Light Fixtures & Light Bulbs | | | |
| Exhaust Fan & Heater | | | |
| Closet & Shelves | | | |
| Countertops | | | |
| Sinks, Stoppers, Faucets, Drains & Plumbing | | | |
| Shower Caulking, Faucets& Drains | | | |
| Shower Walls & Track | | | |
| Towel Racks | | | |
| Toilet Paper Holder | | | |
| Toliet Seat & Bowl | | | |
| BEDROOM #1 | | | |
| Floors & Floor Coverings | | | |
| Walls & ceilings | | | |
| Windows, Locks & Screens | | | |
| Window Coverings | | | |
| Doors, Knobs & Locks | | | |
| Light Fixtures & Light Bulbs | | | |
| Closet & Shelves | | | |
| BEDROOM #2 | | | |
| Floors & Floor Coverings | | | |
| Walls & ceilings | | | |
| Windows, Locks & Screens | | | |
| Window Coverings | | | |
| Doors, Knobs & Locks | | | |
| Light Fixtures & Light Bulbs | | | |
| Closet & Shelves | | | |
| BEDROOM #3 | | | |
| Floors & Floor Coverings | | | |
| Walls & ceilings | | | |
| Windows, Locks & Screens | | | |
| Window Coverings | | | |
| Doors, Knobs & Locks | | | |
| Light Fixtures & Light Bulbs | | | |

| | | | |
|------------------------------|--|--|--|
| Closet & Shelves | | | |
| FRONT ENTRYWAY | | | |
| Doorbell | | | |
| Floors & Floor Coverings | | | |
| Walls & ceilings | | | |
| Windows, Locks & Screens | | | |
| Window Coverings | | | |
| Doors & Locks | | | |
| Light Fixtures & Light Bulbs | | | |
| Closet & Shelves | | | |
| BACK/SIDE ENTRYWAY | | | |
| Floors & Floor Coverings | | | |
| Walls & ceilings | | | |
| Windows, Locks & Screens | | | |
| Window Coverings | | | |
| Doors & Locks | | | |
| Light Fixtures & Light Bulbs | | | |
| Closet & Shelves | | | |
| GROUNDS | | | |
| Lawn, Trees & Shrubs | | | |
| Flower Beds & Garden | | | |
| Walkways | | | |
| Driveway | | | |
| Parking Area | | | |
| Patio/Deck | | | |
| GARAGE/ CARPORT | | | |
| Floor | | | |
| Doors & Locks | | | |
| Light Fixtures & Light Bulbs | | | |
| Cabinets & Shelving | | | |
| Countertops | | | |
| NOTES: | | | |
| | | | |

Move-IN Inspection Checklist completion:

| | | |
|--|--|------|
| Printed Name (TENANT) | Signature (TENANT) | DATE |
| Printed name (OTB Investments Representative) | Signature (OTB Investments Representative) | DATE |

Move-OUT Inspection Checklist completion:

| | | |
|---|--|------|
| Printed Name (TENANT) | Signature (TENANT) | DATE |
| Printed name (OTB Investments Representative) | Signature (OTB Investments Representative) | DATE |

