



the
"CAREtakers"

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Equal Housing Opportunity
This institution is an equal opportunity provider and employer.

UNIT INSPECTION REPORT

Project Name: _____ Date: _____
Tenant: _____ Apt. #: _____
Type of Inspection: Move-In _____ Move-Out _____ Annual _____

Acceptable
ENTRY Yes No Comments

Front Door

- 1. Weatherstrip
- 2. Locks

Ceiling

Walls

Floor Covering

Electrical

- 1. Plug-ins
- 2. Switches

Trim

Closet

Doorbell

KITCHEN Yes No Comments

Ceiling

Walls

Floor Covering

Appliances

- 1. Range
- 2. Range Hood
- 3. Exhaust Fan
- 4. Refrigerator
- 5. Dishwasher
- 6. Disposal

Cabinets

- 1. Countertops
- 2. Doors
- 3. Hardware
- 4. Drawers

Trim

Doors

Windows

- 1. Operates
- 2. Glass
- 3. Screen
- 4. Clean
- 5. Drapes

Telephone Jacks

LIVING ROOM Yes No Comments

Ceiling

Walls

Floor Covering

Windows

- 1. Operates
- 2. Glass
- 3. Screen
- 4. Clean
- 5. Drapes

Electrical

- 1. Outlets
- 2. Switches
- 3. Ceiling Fixtures

Trim

DINING ROOM Yes No Comments

Ceiling

Walls

Floor Covering

Windows

- 1. Operates

