

Property: _____

Date: _____

Vacant Checklist

Apartment Number: _____ Property Manager or Designee: _____ Date of Inspection: _____

Move-In Date: _____ Welcome Gift Left By: _____

Building Common Area:

- | | |
|---|---|
| <input type="checkbox"/> Free of miscellaneous papers | <input type="checkbox"/> Doors and locks are in working order |
| <input type="checkbox"/> Clean | <input type="checkbox"/> Hallways clean |

Apartment Entrance:

- | | |
|---|---|
| <input type="checkbox"/> Woodwork is in good condition | <input type="checkbox"/> Locks are in working order |
| <input type="checkbox"/> Door stoppers are in working order | <input type="checkbox"/> Painted / Door Tag / Knocker |

Living Room:

- | | |
|--|--|
| <input type="checkbox"/> Carpet is clean and smells fresh | <input type="checkbox"/> Screens are not ripped |
| <input type="checkbox"/> Blinds are clean | <input type="checkbox"/> Radiator baseboards are painted and secured |
| <input type="checkbox"/> Blinds are hung uniformly and turned open | <input type="checkbox"/> A/C filter cover is clean |
| <input type="checkbox"/> Windows are clean inside and out | <input type="checkbox"/> A/C is in working order |
| <input type="checkbox"/> Windows and/or door tracks are clean | <input type="checkbox"/> Ceiling fan / chandelier is clean |
| <input type="checkbox"/> Windows are locked | <input type="checkbox"/> Lights are in working order and cleaned |
| <input type="checkbox"/> Window sills are clean of debris | |

Kitchen:

- | | |
|---|--|
| <input type="checkbox"/> Appliances are cleaned inside, outside, back, sides, and underneath. | <input type="checkbox"/> Rubber gaskets are clean |
| <input type="checkbox"/> Cabinets do not contain paint smudges | <input type="checkbox"/> All knobs are in working order and match |
| <input type="checkbox"/> Cabinets are free of debris and contact paper | <input type="checkbox"/> Refrigerator is clean on top, sides, and bottom |
| <input type="checkbox"/> Oven is clean inside and out | <input type="checkbox"/> All drawers and shelves are clean |
| <input type="checkbox"/> Range hood light and fan are in working order | <input type="checkbox"/> Dishwasher is clean inside and out |
| <input type="checkbox"/> Range hood is clean with a new filter | <input type="checkbox"/> Floor is clean and secured |
| <input type="checkbox"/> Stove burners are clean | <input type="checkbox"/> Sink is clean with a functioning garbage disposal and running water |
| <input type="checkbox"/> Broiler and stove racks are clean | <input type="checkbox"/> Countertops are clean |

Hallways:

- | | |
|--|--|
| <input type="checkbox"/> Carpet is clean | <input type="checkbox"/> Closet shelves are clean |
| <input type="checkbox"/> Closet doors are on track and painted | <input type="checkbox"/> Light bulbs are in working order and have a string attached |



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Patio / Balcony:

- | | |
|--|--|
| <input type="checkbox"/> Door is painted on the inside and outside | <input type="checkbox"/> Glass doors are clean |
| <input type="checkbox"/> Blinds are clean and in working order | <input type="checkbox"/> Glass doors are free of paint |
| <input type="checkbox"/> Patio is clean of debris and trash | <input type="checkbox"/> Door locks are in working order |

Bathroom: *If more than one bathroom is inspected, please fill out an additional page for the other bathroom(s).*

- | | |
|--|---|
| <input type="checkbox"/> There are no stains or soap scum in the tub, shower, sink, or toilet. | <input type="checkbox"/> The sink floor board is in good condition |
| <input type="checkbox"/> Shower door and shower door tracks are clean | <input type="checkbox"/> The sink stopper is in working order and pulled |
| <input type="checkbox"/> The bathtub/shower tile has no dirt or damage | <input type="checkbox"/> Cabinets below the sink are clean with no leaks |
| <input type="checkbox"/> Floor tiles are clean | <input type="checkbox"/> Medicine cabinet is in good condition without cracks |
| <input type="checkbox"/> Toilet is clean inside and out (check for hair) | <input type="checkbox"/> Medicine cabinet tracks are in working order |
| <input type="checkbox"/> Toilet flushes and is in working order | <input type="checkbox"/> Medicine cabinet is clear of pain on the outside |
| <input type="checkbox"/> There is a new toilet seat and toilet paper holder | <input type="checkbox"/> Medicine cabinet shelves are in working order |
| <input type="checkbox"/> The sink has running water and is not clogged | <input type="checkbox"/> Light panel on the medicine cabinet is clean |
| | <input type="checkbox"/> Exhaust fan is in working order with no holes in the ceiling |

Bedroom: *If more than one bedroom is inspected, please fill out an additional page for the other bedroom(s).*

- | | |
|--|--|
| <input type="checkbox"/> Doors open and close smoothly and have matching knobs | <input type="checkbox"/> Screens are not ripped |
| <input type="checkbox"/> Door stoppers are in working order | <input type="checkbox"/> Blinds are clean |
| <input type="checkbox"/> Carpets are clean and in good condition | <input type="checkbox"/> Blinds are hung uniformly and turned open |
| <input type="checkbox"/> A/C and heat is in working order | <input type="checkbox"/> Closet carpet is in good condition |
| <input type="checkbox"/> A/C cover is clean | <input type="checkbox"/> Closet doors are on track |
| <input type="checkbox"/> Window locks are in working order | <input type="checkbox"/> Closet shelves are painted and clean |
| <input type="checkbox"/> Windows, window tracks, and window sills are clean | <input type="checkbox"/> Light bulbs are in working order and have a string attached |

Please note and report any problems found in the unit to the Maintenance Supervisor.

- | | | |
|--|---|--|
| <ul style="list-style-type: none">• Appliances not working• Lights not working• Leaks• Smoke detector batteries are new• CO detector (if applicable) batteries are new | <ul style="list-style-type: none">• Filter is new• Appliances pull out for seek and seal and other areas checked for access of rodents• Pest control check• Mail box works and key works | <ul style="list-style-type: none">• Apartment keys checked and tagged• Filter Changed• Other |
|--|---|--|

Maintenance Associate Signature: _____

Date: _____

Time: _____

