

Important - Read This Carefully

Note: One COPY to be retained by landlord and one by tenant(s).

This is an important document. Proper use of it may assure the return of your cleaning deposit (any portion not deducted according to the terms of your lease). It should be filled out completely by both the landlord and tenant(s) as close to the beginning of the rental as possible, preferably before taking possession of the premises.

Inventory Checklist

Date Moved In: _____

Address: _____ Apartment No. _____

ITEM	NO.	CONDITION AT TIME OF CHECK-IN	CONDITION AT TIME OF CHECK-OUT	REMARKS
Bed				
Bookshelves				
Cabinets				
Carpets				
Chest of Drawers				
Desk				
Desk Lamp				
Dining Table				
Doors				
Drapes				
Easy Chair				
End Table				
Floor Lamp				
Floors				
Mirrors				
Refrigerator				
Sectional				
Shades				
Sofa				
Stove				
Straight Back Chair				
Walls				
Windows				

Use additional sheet if necessary.

Approved at time of check-in on _____
(Date)

Approved at time of check-out on _____
(Date)

Tenant(s): _____

Signature of Landlord

Signature of Landlord

Inventory Check List

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Form revised 10/23/02 by UNT Student Legal Advisor