

# Pre-Lease Inspection Form

General Condition of Unit: *check each section* **Date:** \_\_\_\_\_

**Instructions:** Indicate in the blocks the condition of each item using the key below.

<b>Key</b>	<b>(E)</b> Excellent	<b>(G)</b> Good	<b>(F)</b> Fair	<b>(P)</b> Poor
------------	----------------------	-----------------	-----------------	-----------------

Room	Wall	Ceiling	Window	Doors	Sinks & Fixtures	Smoke Detector
Kitchen						
Living-room						
Bathroom 1						
Bathroom 2						
Bedroom 1						
Bedroom 2						
Bedroom 3						

Pest, Condition of appliances, and other items not listed on table above: