

## Maintenance Checklist

**Note:** Place a check mark (✓) beside the items that are okay. Write-in what needs to be done and what was done beside the items that need/needed repair. (Approximate time to complete 2-6 hours)

Property: \_\_\_\_\_ Apartment No.: \_\_\_\_\_

### Front Door:

- \_\_\_ Closes correctly
- \_\_\_ Weather stripping
- \_\_\_ Door stops
- \_\_\_ Deadbolt
- \_\_\_ Keyless lock
- \_\_\_ Peephole
- \_\_\_ Door paint
- \_\_\_ Lock re-keyed or changed (initial)
- \_\_\_ 2 keys ready for door lock and mail box

### Back Door:

- \_\_\_ Closes correctly
- \_\_\_ Weather stripping
- \_\_\_ Deadbolt
- \_\_\_ Keyless lock

Other: \_\_\_\_\_

### Living Room:

- \_\_\_ Light & Fixtures
- \_\_\_ Tile/Flooring
- \_\_\_ Bookcase/Other
- \_\_\_ Blinds/Verticals

### Fireplace:

- \_\_\_ Dampers
- \_\_\_ Screens
- \_\_\_ Grates
- \_\_\_ Paint

### Sliding Glass Doors:

- \_\_\_ Rolls smoothly
- \_\_\_ Lock easily
- \_\_\_ Lock pins/Bars
- \_\_\_ Screens

Other: \_\_\_\_\_

### Dining Room:

- \_\_\_ Light & Fixtures
- \_\_\_ Shelves/cabinets
- \_\_\_ Screens
- \_\_\_ Doors

### Den:

- \_\_\_ Light & Fixtures
- \_\_\_ Shelves/cabinets
- \_\_\_ Screens
- \_\_\_ Doors

Other: \_\_\_\_\_

### Smoke Alarm/Fire Extinguisher:

- \_\_\_ Battery good (Y/N)
- \_\_\_ Circuitry test good
- \_\_\_ Extinguisher fully charged
- \_\_\_
- \_\_\_

### Washer/Dryer Room:

- \_\_\_ Washer/Dryer connections
- \_\_\_ Dryer vent clear
- \_\_\_ Shelving
- \_\_\_ Doors
- \_\_\_ Flooring

### Outside Utility Room:

- \_\_\_ Condition or doors
- \_\_\_ Shelf
- \_\_\_ Paint/Sheetrock

### Patio or Balcony:

- \_\_\_ Patio light/globe
- \_\_\_ Paint
- \_\_\_ Hand rail

Other: \_\_\_\_\_

### Disposal:

- \_\_\_ Clear & free
- \_\_\_ Reset not tripped
- \_\_\_ Stopper in place
- \_\_\_ Switch works
- \_\_\_ Splash guard
- \_\_\_ Check operation

### Kitchen Plumbing:

- \_\_\_ Leaking faucets
- \_\_\_ Aerators missing or stopped up
- \_\_\_ Leaking drains
- \_\_\_ Stoppers & pop-ups
- \_\_\_ Sink - no damage; strainers & covers
- \_\_\_ Caulking

## Maintenance Checklist

### Stove:

- ☐ Vent hood works, all speeds & light
- ☐ Burners work
- ☐ Indicator lights
- ☐ Oven racks
- ☐ Broiler pan in stove

### Kitchen Floor/Cabinets/Drawer Fronts:

- ☐ Floor tile good
- ☐ Caulk & moldings at floor
- ☐ Caulk & cabinet connections
- ☐ Broken/sagging shelves
- ☐ Drawers slide easily

### Bathrooms 1-2

- | 1                        | 2                        |                                |
|--------------------------|--------------------------|--------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Toilet seats                   |
| <input type="checkbox"/> | <input type="checkbox"/> | Toilet working & flappers good |
| <input type="checkbox"/> | <input type="checkbox"/> | Sink stopper working           |
| <input type="checkbox"/> | <input type="checkbox"/> | Leaky pipes (& chk under sink) |
| <input type="checkbox"/> | <input type="checkbox"/> | Tub stopper works              |
| <input type="checkbox"/> | <input type="checkbox"/> | Hot/cold water in sink         |
| <input type="checkbox"/> | <input type="checkbox"/> | Hot/cold water in tub          |
| <input type="checkbox"/> | <input type="checkbox"/> | Aerators clean                 |
| <input type="checkbox"/> | <input type="checkbox"/> | Shower head                    |
| <input type="checkbox"/> | <input type="checkbox"/> | Sink not damaged               |
| <input type="checkbox"/> | <input type="checkbox"/> | Pop-ups, screens, & stoppers   |
| <input type="checkbox"/> | <input type="checkbox"/> | Cabinet shelves broken/sagging |
| <input type="checkbox"/> | <input type="checkbox"/> | Tile & flooring                |

- | 1                        | 2                        |                                  |
|--------------------------|--------------------------|----------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | Lights & Fixtures                |
| <input type="checkbox"/> | <input type="checkbox"/> | Cabinets/drawers work            |
| <input type="checkbox"/> | <input type="checkbox"/> | Shower rods & ends               |
| <input type="checkbox"/> | <input type="checkbox"/> | Door stops                       |
| <input type="checkbox"/> | <input type="checkbox"/> | Medicine cabinet                 |
| <input type="checkbox"/> | <input type="checkbox"/> | Mirror(s)                        |
| <input type="checkbox"/> | <input type="checkbox"/> | Linen closet shelves             |
| <input type="checkbox"/> | <input type="checkbox"/> | Caulking (remove old & re-caulk) |
| <input type="checkbox"/> | <input type="checkbox"/> | Shower walls grouted             |
| <input type="checkbox"/> | <input type="checkbox"/> | Door locks work                  |
| <input type="checkbox"/> | <input type="checkbox"/> | Toilet paper holder              |
| <input type="checkbox"/> | <input type="checkbox"/> | Toilet paper roller              |
| <input type="checkbox"/> | <input type="checkbox"/> | Towel bar(s)                     |

Other: \_\_\_\_\_

### Bedrooms 1-2-3

- | 1                        | 2                        | 3                        |                   |
|--------------------------|--------------------------|--------------------------|-------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Lights & fixtures |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Screens           |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Closet poles      |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Closet shelves    |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Door stops        |

- | 1                        | 2                        | 3                        |                   |
|--------------------------|--------------------------|--------------------------|-------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Blinds/verticals  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Window locks      |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Caulk windows     |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Water spots       |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Sheetrock repairs |

Other: \_\_\_\_\_

### Electric Panel:

- |  |  |
|--|--|
| <input type="checkbox"/> Check/tighten all connections | <input type="checkbox"/> Compound aluminum connections |
|--|--|

### Heating & Cooling Systems:

- |   |  |
|---|--|
| <input type="checkbox"/> Change & check filter                | <input type="checkbox"/> Check electrical connections                |
| <input type="checkbox"/> Thermostat loose or broken           | <input type="checkbox"/> Blower wheel alignment & tightness          |
| <input type="checkbox"/> Check/clean evaporator & drain lines | <input type="checkbox"/> Tightness of all covers evaporator/drain    |
| <input type="checkbox"/> Clean drain lines & check pan        | <input type="checkbox"/> Air return/registers/covers                 |
| <input type="checkbox"/> Heat works                           | <input type="checkbox"/> Clean condenser & check blade freedom/tight |
| <input type="checkbox"/> Cool works                           | <input type="checkbox"/> Covers & insulation in place                |

Other: \_\_\_\_\_

### Water Heater:

- |   |   |
|---|---|
| <input type="checkbox"/> Check for leaks            | <input type="checkbox"/> Check correct thermostat setting for leaks |
| <input type="checkbox"/> Connections tight/pan/rust | <input type="checkbox"/> Check for operation                        |

Other: \_\_\_\_\_

**Carpet:**

\_\_\_ Seams & spots  
\_\_\_ Base board  
\_\_\_ Carpet replacement (Y/N)  
\_\_\_ Tack strips or Z bar

**Paint/Sheetrock/Moldings/Other**

\_\_\_ Ceiling painted (if necessary)  
\_\_\_ Baseboards  
\_\_\_ Sheetrock repair  
\_\_\_ Hardware, other fixtures, etc.

Other: \_\_\_\_\_

Maintenance Person's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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