

## RESIDENTIAL UNIT MAKE-READY REPORT

Property: \_\_\_\_\_

Unit : \_\_\_\_\_

Date vacated: \_\_\_\_\_ Date to be occupied (if known): \_\_\_\_\_

Initial inspection by: \_\_\_\_\_ Date: \_\_\_\_\_

| Checklist Before Move-In   | Special Instructions |
|--|----------------------|
| <input type="checkbox"/> Check that all plumbing in unit (toilets, faucets, etc.) works properly. Make sure there are no leaks or drainage problems.   |                      |
| <input type="checkbox"/> Check all appliances (run dishwasher once on each cycle; check for proper operation of refrigerator, disposal, & range). Make sure that all appliances and kitchen cabinets are clean.                          |                      |
| <input type="checkbox"/> Inspect all windows and screens (no breaks in either). Verify that all sliding components work correctly and easily. Clean-out tracks of all windows and sliding glass doors. Clean inside of all window panes. |                      |
| <input type="checkbox"/> Check painted surfaces for chipping, peeling, discoloration and stains. Determine whether repainting is necessary.  |                      |
| <input type="checkbox"/> Check all walls for holes, seams, cuts, cracks and nail pops.   |                      |
| <input type="checkbox"/> Check venetian blinds for proper operation and cleanliness.   |                      |
| <input type="checkbox"/> Check flooring (all floors s/b cleaned and waxed, parquet block floors or wood strip and asphalt tile included; & carpet vacuumed).   |                      |
| <input type="checkbox"/> Clean bathroom(s) (tub, toilet, basins, vanities, mirrors, medicine cabinets, wall and floor tile).   |                      |
| <input type="checkbox"/> Verify that all towel bars, toilet paper holders and soap dishes are secure and clean.  |                      |
| <input type="checkbox"/> Check tile in bathroom(s) for crack or flaws.   |                      |
| <input type="checkbox"/> Make sure that all baseboards, cabinets, shelves, electrical outlet plates, and smoke detectors are properly secured and installed.   |                      |
| <input type="checkbox"/> Verify that thresholds and metal strips are installed properly where needed.  |                      |
| <input type="checkbox"/> Check that all doors close properly and there is no rubbing or warping.   |                      |
| <input type="checkbox"/> Check that all vents and registers are properly installed.  |                      |
| <input type="checkbox"/> Check heating and air conditioning units to verify that they are working properly. Clean or replace air conditioning filter.  |                      |
| <input type="checkbox"/> Make sure that all lighting fixtures work properly and have new bulbs.  |                      |

## RESIDENTIAL UNIT MAKE-READY REPORT

Other \_\_\_\_\_

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\_\_\_\_\_

Other \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Other \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Final Inspection by: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

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