

# Move-Out Inspection Form

<b>Move-out Date:</b>	<b>Landlord Name:</b>
<b>Inspection Date:</b>	<b>Tenant Name:</b>
<b>Address:</b>	<b>Tenant Name:</b>

**Are the following elements in good working order?**

Element	Working? Yes/No	Element	Working? Yes/No
Heating	Yes/No	Light Fixtures	Yes/No
Air Conditioning	Yes/No	Stove	Yes/No
Doors & Locks	Yes/No	Oven	Yes/No
Windows, Screens & Locks	Yes/No	Fridge & Freezer	Yes/No
Sinks & Showers	Yes/No	Range Hood	Yes/No
Toilets	Yes/No	Dishwasher	Yes/No

**Are the following safety items in place and working?**

Safety Item	Working? Yes/No
Smoke Alarms	Yes/No
Carbon Monoxide Detectors	Yes/No
Fire Extinguisher	Yes/No

**If there are existing damages or other items needing replacement or repairs, list them in the chart below. Review floors, walls, counters, cabinets, closets, decks, railings, and driveway.**

Item in Need of Repair	Location	Notes

Tenant Signature \_\_\_\_\_ Date \_\_\_\_\_

Landlord Signature \_\_\_\_\_ Date \_\_\_\_\_

*Normal wear & tear is expected during a tenancy. As per the Residential Tenancies Act, the Landlord is responsible for all maintenance & repairs. Tenants are responsible for wilful or negligent damage.*