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## MOVE-IN/MOVE-OUT WALK-THROUGH CHECKLIST

**Tenants:** \_\_\_\_\_ **Leased Premises:** \_\_\_\_\_  
**Lease Start Date:** \_\_\_\_\_

| Room/Item               | Move-In Condition<br>DATE: | Move-Out Condition<br>DATE: | Other Notes |
|-------------------------|----------------------------|-----------------------------|-------------|
| <b>LIVING ROOM/AREA</b> |                            |                             |             |
| DOOR & LOCKS            |                            |                             |             |
| WINDOWS & SCREENS       |                            |                             |             |
| CARPET OR FLOORING      |                            |                             |             |
| WALLS                   |                            |                             |             |
| CEILING/FAN             |                            |                             |             |
| LIGHTS & SWITCHES       |                            |                             |             |
| Other                   |                            |                             |             |
| <b>DINING ROOM/AREA</b> |                            |                             |             |
| DOOR & LOCKS            |                            |                             |             |
| WINDOWS & SCREENS       |                            |                             |             |
| CARPET OR FLOORING      |                            |                             |             |
| WALLS                   |                            |                             |             |
| CEILING/FAN             |                            |                             |             |
| LIGHTS & SWITCHES       |                            |                             |             |
| Other                   |                            |                             |             |
| <b>HALLWAY</b>          |                            |                             |             |
| CARPET OR FLOORING      |                            |                             |             |
| WALLS                   |                            |                             |             |
| CEILING                 |                            |                             |             |
| LIGHTS & SWITCHES       |                            |                             |             |
| <b>KITCHEN</b>          |                            |                             |             |
| STOVE/RANGE             |                            |                             |             |
| REFRIGERATOR            |                            |                             |             |
| SINK-CABINETS-COUNTERS  |                            |                             |             |
| WINDOWS & SCREENS       |                            |                             |             |
| DISHWASHER              |                            |                             |             |
| CARPET OR FLOORING      |                            |                             |             |
| WALLS                   |                            |                             |             |
| CEILING/FAN             |                            |                             |             |
| LIGHTS & SWITCHES       |                            |                             |             |
| OTHER                   |                            |                             |             |
|                         |                            |                             |             |
|                         |                            |                             |             |
|                         |                            |                             |             |



**VIRGINIA ASSOCIATION OF REALTORS®**

**RESIDENTIAL MOVE-IN MOVE-OUT INSPECTION REPORT**



This Move-In Move-Out Inspection Report is by and between \_\_\_\_\_ ("Landlord"), and \_\_\_\_\_ ("Tenant"), and \_\_\_\_\_ ("Agent") dated \_\_\_\_\_ for property described as \_\_\_\_\_ for "Dwelling Unit", in accordance with the Lease Agreement by and between the parties.

The Dwelling Unit is being delivered at Move-In by Landlord to Tenant in a clean, sanitary and good working condition with no spots, stains, marks or damages, unless otherwise indicated on this Report. Landlord is not required to make repairs to address damages noted on this Report unless required to do so by law.

Date of Occupancy: \_\_\_\_\_, 20\_\_\_\_ Date of Vacating: \_\_\_\_\_, 20\_\_\_\_

| ROOMS TO BE INSPECTED            | OR | OCCUPANT NOTES | OR | VACATE NOTES | AMOUNT |
|----------------------------------|----|----------------|----|--------------|--------|
| <b>KITCHEN</b>                   |    |                |    |              |        |
| Doors                            |    |                |    |              |        |
| Walls & Ceilings                 |    |                |    |              |        |
| Floor                            |    |                |    |              |        |
| Windows & Screens                |    |                |    |              |        |
| Window Coverings                 |    |                |    |              |        |
| Light Fixtures & Outlets         |    |                |    |              |        |
| Wall Cabinets & Hardware         |    |                |    |              |        |
| Base Cabinets & Hardware         |    |                |    |              |        |
| Range - Fan - Light              |    |                |    |              |        |
| (Broiler Pan)                    |    |                |    |              |        |
| Refrigerator - Ice Trays         |    |                |    |              |        |
| Sink & Disposal                  |    |                |    |              |        |
|                                  |    |                |    |              |        |
| <b>DINING ROOM</b>               |    |                |    |              |        |
| Walls & Ceilings                 |    |                |    |              |        |
| Floor & Carpet                   |    |                |    |              |        |
| Woodwork                         |    |                |    |              |        |
| Light Fixtures & Outlets         |    |                |    |              |        |
| Windows & Screens                |    |                |    |              |        |
| Window Coverings                 |    |                |    |              |        |
| Doors                            |    |                |    |              |        |
|                                  |    |                |    |              |        |
| <b>LIVING ROOM &amp; HALLWAY</b> |    |                |    |              |        |
| Walls & Ceilings                 |    |                |    |              |        |
| Floor & Carpet                   |    |                |    |              |        |
| Woodwork                         |    |                |    |              |        |
| Light Fixtures & Outlets         |    |                |    |              |        |

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Carleton University

Joint Health and Safety Committee - Workplace Inspection Report

Building:

Area Inspected:

Date:

Inspected by:

Tel:

Email:

| Department | Room | Hazard | Recommended Corrective Action | Corrective Action Taken or Planned | Date | Initial |
|------------|------|--------|-------------------------------|------------------------------------|------|---------|
|            |      |        |                               |                                    |      |         |
|            |      |        |                               |                                    |      |         |
|            |      |        |                               |                                    |      |         |
|            |      |        |                               |                                    |      |         |
|            |      |        |                               |                                    |      |         |
|            |      |        |                               |                                    |      |         |
|            |      |        |                               |                                    |      |         |
|            |      |        |                               |                                    |      |         |
|            |      |        |                               |                                    |      |         |

REPORT DISTRIBUTION (within two working days following workplace inspection)

|                                                                |                |                                                                                                                                                                                                                    |
|----------------------------------------------------------------|----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Area Supervisor(s), Designated Contact(s), Building Authority: |                | Shall provide a written response outlining corrective action taken or planned within 21 calendar days. Send responses to <a href="#">jhscc_reports@carleton.ca</a> , as well as to worker member identified above. |
| JHSC Management Member Contact:                                |                | To ensure appropriate report distribution.                                                                                                                                                                         |
| Environmental Health and Safety:                               | Nancy Delcobel | For tracking response from Area Supervisor(s).                                                                                                                                                                     |
| JHSC Worker Member:                                            | Ken Hault      | For tracking completion of JHSC workplace inspections.                                                                                                                                                             |

Inspection information proves the property's consonant when the tenant moves and when the tenant moves. The act of residential rental requires that at least two written inspection notices be made. The change in the inspection report must occur one week before or after the tenant moves. The motion inspection report must occur one week before or after the tenant moves. Ideally, inspections should be completed when the property is empty. Tenants must attend inspections with the landlord. However, if the landlord proposes twice separately for inspection and the tenant does not agree to participate, the landlord can complete the inspection without the tenant. It should be noted in the inspection report whether the tenant attended or not. Inspections must take place between 8 am and 8am and cannot be scheduled for a holiday. After completing the inspection, the lessor should immediately give the tenant a written inspection report. Both the lessor and the tenant must keep a copy of any inspection notices in the event of a dispute. Landlords are required to keep inspection information for three years after a lease has ended. If the landlord does not carry out an inspection before or after the lease, the landlord cannot deduct anything from the security deponye for physical damage to the property that goes © to normal wear and tear. If a landlord makes a deduction from the security deduction without carrying out both inspection notices, the tenant may take legal action to recover his security dept. Note: Your initial responses are automatically saved when you view the document. This screen can be used to save additional files from your responses. Check to hide this tip in the future. Naval Air Station Fort Worth Joint Reserve Base (or NAS Fort Worth JRB) (IATA: FWH, ICAO: KNFW, FAA LID: NFW) includes Carswell Field, a military airbase located 5 nautical miles (9 km; 6 mi) west of the central business district of Fort Worth, in Tarrant County, Texas, United States.This military airfield is operated by the United States Navy Reserve. Jul 27, 2016 - The report also found that a reduction in the standard work week after which overtime would be paid would increase the use of overtime. Among the report's recommendations were: the standard work week should be reduced from 44 hours to 40; overtime after 40 hours per week should be voluntary and paid at time-and-a-half. The Canadian Security Intelligence Service (CSIS, /' s i : s i s /; French: Service canadien du renseignement de sécurité, SCRS) is Canada's primary national intelligence service.It is responsible for collecting, analysing, reporting and disseminating intelligence on threats to Canada's national security, and conducting operations, covert and overt, within Canada and .... Newsletter sign up. Take A Sneak Peak At The Movies Coming Out This Week (8/12) Minneapolis-St. Paul Movie Theaters: A Complete Guide Dec 28, 2021 · NEXUS is a trusted traveler program that helps you move through ports of entry or airport lines more quickly. We cover everything you need to know. Biology & Behavior. Mountain lions are known by many names, including cougar, puma, catamount, painter, panther, and many more. They are the most wide-ranging cat species in the world and are found as far north as Canada and as far south as Chile. Password requirements: 6 to 30 characters long; ASCII characters only (characters found on a standard US keyboard); must contain at least 4 different symbols; Click to get the latest Buzzing content. Take A Sneak Peak At The Movies Coming Out This Week (8/12) Minneapolis-St. Paul Movie Theaters: A Complete Guide

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