



American Realty

Property Management

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Unit Condition Form – Common Area – 2 Bed Unit

_____ (Unit)

Tenant Name (Print) _____

Tenant Name (Print) _____

Instructions: Tenants complete this checklist within seven (7) days of moving in. Tenant and Landlord review Unit Condition Form and agree on the condition of the property by both signing this form. Landlord will use this Unit Condition Form during the pre-move out inspection and again when determining if any of the Tenant’s security deposit will be retained for cleaning or repairs after move-out. A box left blank will assume brand new condition. Upon moving out: You must respond to this notice by mail within seven days after receipt of same, otherwise you will forfeit the amount claimed for damages.

Common area damages will be split evenly amongst all tenants unless specifically agreed upon arrangements have been made and agreed upon prior to move out. These arrangements will need to be in writing and be signed by both the Landlord and Tenants involved with the dispute. NO EXCEPTIONS.

To be filled out by Tenants

To be filled out by Management

Condition on Arrival

Condition on Departure

Amount Subtracted
from Deposit for
Damage

Date of Inspection

____ / ____ / ____

____ / ____ / ____

Living Room			
Floor and Floor Coverings			
Walls & Ceilings			
Windows & Screens			
Window Coverings (Blinds)			
Closet, Including door and tracks			
Light Fixture			
Smoke Detector			
Door & Lock			
Other -			

Bedroom One:			
Floor and Floor Coverings			
Walls & Ceilings			
Windows & Screens			
Window Coverings (Blinds)			
Closet: Including door and track			
Light Fixtures			
Smoke Detector			
Door & Lock			
Other-			
Bedroom Two:			
Floor and Floor Coverings			
Walls & Ceilings			
Windows & Screens			
Window Coverings (Blinds)			
Closet: Including door and track			
Light Fixtures			
Smoke Detector			
Door & Lock			
Other-			
Kitchen			
Floor and Floor Coverings			
Walls & Ceilings			
Fire Extinguisher			
Lighting Fixture			
Stove/Oven/ Range Hood			
Refrigerator			
Dishwasher			
Cabinets			
Counters			
Sink/Plumbing			
Door & Lock			
Other -			
Bathroom			
Floor and Floor Coverings			
Walls & Ceilings			
Windows & Screens			
Window Coverings (Blinds)			

Sink/Plumbing			
Toilet			
Shower / Tub			
Lighting Fixture			
Door & Lock			
Other -			
Miscellaneous			
Heating System			
Air Condition			
Hallways			
Patio / Deck			
Other -			
Other -			
Other -			

Total subtracted from security deposits \$ _____

Number of Tenants _____

Total subtracted from each individual security deposit \$ _____

We Tenants have filled this form out to the best of our ability as accurate as possible.

TENANT SIGNATURE _____ DATE _____

TENANT SIGNATURE _____ DATE _____

I, Landlord agree to the condition of the unit in which the Tenant is representing upon move in.

LANDLORD SIGNATURE _____ DATE _____

I, Landlord have conducted a move out inspection and deducted any necessary charges from the deposit for the repairs needed to this unit.

LANDLORD SIGNATURE _____ DATE _____