



TENANT PROPERTY INSPECTION REPORT – PLEASE PRINT LEGIBLY

This form serves as your FIVE DAY PROPERTY INSPECTION REPORT to report any defects or condition of the property that you do not want to be held responsible for upon vacating the property at the end of your lease term. We will use this form to determine how much security deposit will be refunded after you vacate. The property will be assumed to be in good condition if no items are reported to management and/or if you choose NOT to return this to AZ Real Estate & Property Management within the required time allowance. You have the right to be present at the move out inspection. **Please fill in your current phone & email below so that we can contact you with any questions.**

Property Address: _____

Tenant(s): _____

Phone: _____ **Email Address:** _____

SUBJECT ROOM:	NOTES:
<u>KITCHEN</u>	
Flooring/Carpets	
Walls/Baseboards/Ceiling	
Cabinets/Shelves/ Counters	
Drawers/Doors	
Stovetop/Burners/Drip Pans	
Hood: Filter/Fan/ Bulb	
Oven: Racks/Glass/Broiler Pan/Bulb	
Refrig/Freezer: Racks/Drawers/Bulbs	
Underneath Appliances	
Fixtures/Bulbs/Switches/Sockets	
Sink/Under Sink/Disposal	
Dishwasher	
Windows/Tracks/Screens	
Window Coverings	
Other:	

DINING ROOM	
Flooring/Carpets	
Walls/Baseboards/Ceiling	
Cabinets/Shelves/ Counters	
Drawers/Doors	
Light Fixtures/Bulbs/Switches/Sockets	
Windows/Tracks/Screens	
Window Coverings	
Other:	
<u>LIVING/FAMILY ROOM</u>	
Flooring/Carpets	
Walls/Baseboards/Ceiling	
Cabinets/Shelves/ Counters	
Drawers/Doors	
Light Fixtures/Bulbs/Switches/Sockets	
Window Coverings	
Other:	
<u>BATHROOM#1</u>	
Flooring/Carpets	
Cabinets/Shelves/ Counters	
Drawers/Doors	
Light Fixtures/Bulbs/Switches/Sockets	
Window Coverings	
Toilet/Shower/Tub	
Sink/Basin/Facet	
Other:	
<u>BATHROOM#2</u>	
Flooring/Carpets	
Cabinets/Shelves/ Counters	
Drawers/Doors	
Light Fixtures/Bulbs/Switches/Sockets	
Window Coverings	

Sink/Basin/Facet	
Toilet/Shower/Tub	
Other:	
<u>BATHROOM#3</u>	
Flooring/Carpets	
Cabinets/Shelves/ Counters	
Drawers/Doors	
Light Fixtures/Bulbs/Switches/Sockets	
Window Coverings	
Sink/Basin/Facet	
Toilet/Shower/Tub	
Other:	
Light Fixtures/Bulbs/Switches/Sockets	
Window Coverings	
Closets	
Other:	
<u>BEDROOM #2</u>	
Flooring/Carpets	
Walls	
Baseboards	
Ceiling	
Cabinets/Shelves/ Counters	
Drawers/Doors	
Light Fixtures/Bulbs/Switches/Sockets	
Window Coverings	
Closets	
Other:	
<u>BEDROOM #3</u>	
Flooring/Carpets	
Walls	
Baseboards	
Ceiling	

Cabinets/Shelves/ Counters	
Drawers/Doors	
Light Fixtures/Bulbs/Switches/Socket	
Window Coverings	
Closets	
Other:	
<u>UTILITY ROOM</u>	
Flooring/Carpets	
Walls	
Baseboards	
Ceiling	
Cabinets/Shelves/ Counters	
Drawers/Doors	
Light Fixtures/Bulbs/Switches/Socket	
Window Coverings	
Washer/Dryer	
Other:	
<u>EXTERIOR</u>	
Driveway/Stains	
Screens/Storm Door	
Front Door/Back Door	
Light Fixtures/Bulbs	
Other	
Other	

Tenant Signature: _____ Date: _____

Tenant Signature: _____ Date: _____

Date Received by AZREAPM: _____

Received within required time? Yes / No