

Condition Inspection Report

A. LEGAL NAME OF LANDLORD (if entry is a business name, enter the full legal business name)

E. POSSESSION DATE

B. LANDLORD'S ADDRESS FOR SERVICE

F. MOVE-IN INSPECTION DATE

<input type="text" value="unit #"/>	<input type="text" value="street #"/>	<input style="width: 95%;" type="text" value="street name"/>	<input style="width: 95%;" type="text" value="city"/>	<input style="width: 95%;" type="text" value="province"/>	<input style="width: 95%;" type="text" value="postal code"/>
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C. LEGAL NAME OF TENANT

G. MOVE-OUT DATE

D. ADDRESS OF RENTAL UNIT

H. MOVE-OUT INSPECTION DATE

<input type="text" value="unit #"/>	<input type="text" value="street #"/>	<input style="width: 95%;" type="text" value="street name"/>	<input style="width: 95%;" type="text" value="city"/>	<input style="width: 95%;" type="text" value="province"/>	<input style="width: 95%;" type="text" value="postal code"/>
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I. LEGAL NAME OF TENANT'S AGENT (if applicable)

		Condition at Beginning of Tenancy		Condition at End of Tenancy	
		COMMENT	CODE	COMMENT	CODE
J. ENTRY	Walls and Trim				
	Ceilings				
	Closets				
	Lighting Fixtures/Ceiling Fan/Bulbs				
	Windows/Coverings				
	Electrical Outlets				
K. KITCHEN	Ceiling				
	Walls and Trim				
	Floor/Carpet				
	Countertop				
	Cabinets and Doors				
	Stove				
	Oven				
	Stove Top				
	Broiler Pan				
	Exhaust Hood and Fan				
	Taps, Sink and Stoppers				
	Refridgerator				
	Crisper				
	Ice Trays				
	Freezer				
	Closet(s)				
Dishwasher					
Lighting Fixtures/Bulbs					
Windows/Coverings					
Electrical Outlets					
L. LIVING ROOM	Ceiling				
	Walls and Trim				
	Floor/Carpet				
	Air Conditioner/Cover				
	Fireplace				
	TV Cable/Adaptor				
	Closet(s)				
	Lighting Fixtures/Ceiling Fan/Bulbs				
	Windows/Coverings				
Electrical Outlets					

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M. DINING ROOM	Ceiling				
	Walls and Trim				
	Floor/Carpet				
	Lighting Fixtures/Ceiling Fan/Bulbs				
	Window/Coverings				
	Electrical Outlets				
N. STAIRWELL and HALL	Treads and Landings				
	Walls and Trim				
	Ceilings				
	Closets				
	Lighting Fixtures/Ceiling Fan/Bulbs				
	Windows/Coverings				
	Electrical Outlets				
O. MAIN BATHROOM	Ceiling				
	Walls and Trim				
	Floor/Carpet				
	Cabinets and Mirror				
	Tub/Shower/Taps/Stopper				
	Sink/Stopper/Taps				
	Toilet				
	Door				
	Lighting Fixtures/Bulbs				
	Windows/Coverings				
	Electrical Outlets				
P. MASTER BEDROOM (1)	Ceiling				
	Walls and Trim				
	Floor/Carpet				
	Closet(s)				
	Doors				
	Lighting Fixtures/Ceiling Fan/Bulbs				
	Windows/Coverings				
	Electrical Outlets				
Q. BEDROOM (2)	Ceiling				
	Walls and Trim				
	Floor/Carpet				
	Closet(s)				
	Doors				
	Lighting Fixtures/Ceiling Fan/Bulbs				
	Windows/Coverings				
R. EXTERIOR	Front and Rear Entrances				
	Patio/Balcony Doors				
	Garbage Containers				
	Glass and Frames				
	Stucco and/or Siding				
	Lighting Fixtures/Bulbs				
	Grounds and Walks				
	Electrical Outlets				
S. GARAGE OR PARKING AREA	Electrical Outlets				
T. STORAGE					

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U. BASEMENT	Stair and Stairwell			
	Walls and Floor/Carpet			
	Furnace, Water Heater, Plumbing			
	Windows/Coverings			
	Lighting Fixtures/Bulbs			
	Electrical Outlets			
V. KEYS AND CONTROLS	TYPE OF KEY OR CONTROL	# ISSUED AT START OF TENANCY	# RETURNED AT END OF TENANCY	
	Building Entrance Keys			
	Rental Unit Entrance Main Locks			
	Rental Unit Deadbolt			
	Parking Remote Control			

START OF TENANCY

W. Repairs to be completed at start of tenancy: (list repairs)

X. I. (Tenant's name) _____

agree that this report fairly represents the condition of the rental unit

do not agree that this report fairly represents the condition of the rental unit for the following reasons:

END OF TENANCY

Y. Damage to rental unit or residential property for which the tenant is responsible:

Z. I. (Tenant's name) _____

agree that this report fairly represents the condition of the rental unit

do not agree that this report fairly represents the condition of the rental unit for the following reasons:

Item AA for BC only

BB. Landlord's Signature: (on Move-In) _____ (on Move-Out) _____

CC. Tenant's Signature: (on Move-In) _____ (on Move-Out) _____

DD. Tenant's Forwarding Address:

unit #	street #	street name	city	province	postal code

EE. Landlord's Name and Address at End of Tenancy:

last name, first name, middle (if entry for landlord is a business name, enter full legal business name)

unit #	street #	street name	city	province	postal code

Condition Inspection Report

INSTRUCTIONS FOR COMPLETING RENTAL UNIT CONDITION REPORT

The landlord and tenant or their representatives are to view the condition of the rental unit together and use this form to record the condition of the rental unit at the time of move-in and at the time of move-out by the tenant.

Condition codes: These are listed on the first page and describe the condition of the rental unit as to repair and damage, and its state of cleanliness.

At the Start of the Tenancy:

1. Box A: Insert the legal name of the landlord.
2. Box B: Insert the landlord's address for service at the start of the tenancy.
3. Box C: Insert the legal name of the tenant.
4. Box D: Insert the address of the rental unit, including suite or apartment number and street address as set out in the tenancy agreement.
5. Box E: Insert the date the tenant is entitled to possession of the rental unit.
6. Box F: Insert the date the move-in inspection is conducted.
7. Box I: Insert the names of the person who carries out the inspection on behalf of the tenant, if not the tenant.
8. Boxes J, K, L, M, N, O, P, Q, R, S, T and U: Use the "Comment" and "Code" columns under the heading "Condition at Beginning of Tenancy" to record the code that best describes the condition of the premises at the beginning of the tenancy for each of the rooms or areas of the rental unit listed in these boxes. Under the Code column list the code for the word that best describes the state of repair or damage, and the code that best describes the state of cleanliness of the unit. If condition and cleanliness are both good, use the ✓. If not, only one code for condition and one code for cleanliness (DT or ST), should be used. Use the comment column to provide details, if necessary, to better describe the condition described by the codes. FOR EXAMPLE: if the ceiling had 3 small holes in it and was clean, on the "ceiling" line you would insert in the Code column the code letter "D" to indicate that the ceiling was damaged and would write the words "3 small holes" in the comment column to describe the damage. If the ceiling was also dirty, you would also insert the letters DT in the Code column. Blank lines should be used to add items such as furniture and electrical connections that are not specified on the form. Tenants can use the "comments" column to note any specific disagreement with the landlord's assessment.
9. Box V: Keys and Controls. Use this section to record the number of keys or controls given to the tenants at the beginning of the tenancy. Keys and controls include metal or plastic door keys, and remote controls to open secured parking gates or garage doors.
10. Box W: Use this box to list repairs that need to be done at the start of the tenancy.
11. Box X: If the tenant disagrees with the report, check "disagree, for the following reasons", note the parts of the report that he or she disagrees with, if any, and set out the

- condition that he or she thinks best describes that part of the rental unit, and then sign and date this box. If the tenant agrees with report, check "agree", and sign and date the box.
12. Box BB: The landlord is to sign in this box on move-in, indicating that the report has been completed.
 13. Box CC: The tenant, or the tenant's agent, is to sign in this box on move-in, indicating that the report has been completed.
 14. The landlord should give the tenant the original of this report immediately, if possible. If the landlord needs to have a copy made, the original must be provided to the tenant within 7 days of the inspection.

At the End of the Tenancy:

15. Box G: Insert the date the tenant moves out of the rental unit.
16. Box H: Insert the date the move-out inspection is carried out.
17. Box I: Insert the names of the person who carries out the inspection on behalf of the tenant, if not the tenant.
18. Boxes J, K, L, M, N, O, P, Q, R, S, T and U: Following the procedure set out in (8), using the column for "Condition at End of Tenancy".
19. Box V: Record the number of keys or controls returned by the tenants at the end of the tenancy.
20. Box Y: Use this box to list all damage to the rental unit or residential property for which the tenant is responsible.
21. Box Z: If the tenant disagrees with the report, check "disagree, for the following reasons", note the parts of the report that he or she disagrees with, if any, and set out the condition that he or she thinks best describes that part of the rental unit, and then sign and date this box. If the tenant agrees with report, check "agree", and sign and date the box.

Item 22 for BC only

23. Box BB: The landlord is to sign in this box on move-out, indicating that the report has been completed.
24. Box CC: The tenant, or the tenant's agent, is to sign in this box on move-out, indicating that the report has been completed.
25. Box DD: The tenant, or the tenant's agent, is to insert the tenant's forwarding address in this space so that the landlord will have an address to forward the security deposit and mail, to the tenant.
26. Box EE: The landlord is to insert his or her name and current mailing address in this space so that the tenant may know where and how to contact the landlord in the future.
27. The landlord should give the tenant the original of this report immediately, if possible. If the landlord needs to have a copy made, the original must be provided to the tenant within 15 days of the inspection.