

# ACCOMMODATION INSPECTION REPORT

Landlord: \_\_\_\_\_

**NAME OF TENANT(S)**

1. \_\_\_\_\_

2. \_\_\_\_\_

ADDRESS OF PREMISES: \_\_\_\_\_

PHONE NUMBERS BUS: \_\_\_\_\_ CELL: \_\_\_\_\_

SECURITY DEPOSIT COLLECTED: \$ \_\_\_\_\_ DATE OCCUPIED: \_\_\_\_\_

VACATED: \_\_\_\_\_ SECURITY DEPOSIT COLLECTED: \$ \_\_\_\_\_ DATE OCCUPIED: \_\_\_\_\_  
VACATED: \_\_\_\_\_

KEY(S) ISSUED FOR PREMISES \_\_\_\_\_ KEY(S) RETURNED FOR PREMISES \_\_\_\_\_  
FOR MAILBOX \_\_\_\_\_ FOR MAILBOX \_\_\_\_\_

### IMPORTANT

THIS FORM SHOULD BE COMPLETED CAREFULLY SO AS TO PROVIDE AN ACCURATE RECORD OF THE CONDITION OF THE PREMISES AT THE BEGINNING AND AT THE END OF THE TENANCY. THIS MUST BE COMPLETED BEFORE MOVE IN UPON POSSESSION AND UPON VACATING THE PREMISES. BOTH THE LANDLORD AND TENANT SHOULD RETAIN A COMPLETED COPY.

Code Number's:

- 1. Clean/OK
- 2. Needs Cleaning
- 3. Needs Painting
- 4. Damaged
- 5. Missing
- 6. Dirty
- 7. Needs Repair

**On Move In**

**On Move**

**Out**

	Code #	Describe Condition	Code #	Describe Condition
<b>ENTRANCE(S): Premises Only-</b>				



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# ACCOMMODATION INSPECTION REPORT

Doors and Closets				
Walls and Trim				
Floor Covering				
<b><i>KITCHEN:</i></b>				
Stove/Oven/Hood				
Fridge				
Dishwasher				
Countertops and Sink				
Cupboards and Doors				
Walls and Trim				
Floor Covering				
Ceiling				
Windows/Screens				
Electrical Fixtures				
<b><i>LIVING/DINING ROOM:</i></b>				
Walls and Trim				
Doors and Closets				
Floor Covering				
Ceiling				
Drapes and Rods				
Windows/Screens				
Electrical Fixtures				
<b><i>BEDROOM 1:</i></b>				



# ACCOMMODATION INSPECTION REPORT

Walls and Trim					
Doors and Closets					
Floor Covering					
Ceiling					
Drapes and Rods					
Windows/Screens					
Electrical Fixtures					
<b><i>BEDROOM 2:</i></b>					
Walls and Trim					
Doors and Closets					
Floor Covering					
Ceiling					
Drapes and Rods					
Windows/Screens					
Electrical Fixtures					
<b><i>BATHROOM:</i></b>					
Walls and Trim					
Doors and Closets					
Floor Covering					
Ceiling					
Tub/Shower					
Sink/Vanity					
Toilet					
Mirror/Cabinet					
Windows/Screens					



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# ACCOMMODATION INSPECTION REPORT

<b><i>BASEMENT:</i></b>			
Walls/Floor			
Furnace/Filter			
Windows/Screens			
Electrical Fixtures			
<b><i>GENERAL:</i></b>			
Laundry Room			
Washer/Dryer			
Patio Door(s)/Screen			
Garage/Parking			
Doors/Screens			
Stairs/Stairwell			
Yard Space			
Smoke Detector(s)			

Items included that belong to the Landlord: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Other Notes: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

IN

OUT

\_\_\_\_\_  
 (RPM Agent)

\_\_\_\_\_  
 Signature of Landlord/Landlord's Agent

\_\_\_\_\_  
 Date (in)

\_\_\_\_\_  
 Date (out)



# ACCOMMODATION INSPECTION REPORT

Tenant Signature

Tenant Signature

Tenants

Forwarding

Address:

\_\_\_\_\_  
\_\_\_\_\_, Alberta. Postal Code: \_\_\_\_\_

Tenants

Forwarding

Address:

\_\_\_\_\_  
\_\_\_\_\_, Alberta. Postal Code: \_\_\_\_\_

Tenants

Forwarding

Address:

\_\_\_\_\_  
\_\_\_\_\_, Alberta. Postal Code: \_\_\_\_\_



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