

## MICHIGAN INVENTORY CHECKLIST

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You are being provided with two copies of the Inventory Checklist. You should complete one checklist, noting the condition of the rental property, and return it to the landlord within 7 days after obtaining possession of the rental unit. You should keep the other copy for your records. You are also entitled to request and receive a copy of the last termination inventory checklist which shows what claims were chargeable to the last prior tenants.

**You must notify the landlord in writing within 4 days after you move of a forwarding address where you can be reached and where you will receive mail; otherwise your landlord shall be relieved of sending you an itemized list of damages and the penalties adherent to that failure.**

Landlord's name and address:

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Security deposit deposited at:

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Name(s) of the tenant(s):

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MOVE-IN CHECKLIST

Move-In Date: \_\_\_\_\_

MOVE-OUT CHECKLIST

Move-Out Date: \_\_\_\_\_

Kitchen:

- Refrigerator \_\_\_\_\_
- Range & oven \_\_\_\_\_
- Broiler \_\_\_\_\_
- Range hood & fan \_\_\_\_\_
- Sink & counter \_\_\_\_\_
- Garbage disposal \_\_\_\_\_
- Cabinets \_\_\_\_\_
- Light fixture \_\_\_\_\_
- Walls/ceiling & paint \_\_\_\_\_
- Carpet/floor \_\_\_\_\_
- Curtains or draperies \_\_\_\_\_
- Windows & screens \_\_\_\_\_
- Furniture \_\_\_\_\_
- Closets \_\_\_\_\_
- Shelves \_\_\_\_\_
- Doors \_\_\_\_\_
- Plumbing fixtures \_\_\_\_\_
- Other \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Dining room

- Thermostat \_\_\_\_\_
- Air conditioner \_\_\_\_\_
- Door \_\_\_\_\_
- Windows & screens \_\_\_\_\_
- Walls/ceiling & paint \_\_\_\_\_
- Carpet/floor \_\_\_\_\_
- Curtains or draperies \_\_\_\_\_
- Light fixture \_\_\_\_\_
- Furniture \_\_\_\_\_
- Closets \_\_\_\_\_
- Shelves \_\_\_\_\_
- Other \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Living room

Thermostat	_____	_____
Air conditioner	_____	_____
Door	_____	_____
Windows & screens	_____	_____
Walls/ceiling & paint	_____	_____
Carpet/floor	_____	_____
TV cord & adaptor	_____	_____
Curtains or draperies	_____	_____
Light fixture	_____	_____
Furniture	_____	_____
Closets	_____	_____
Shelves	_____	_____
Other	_____	_____
	_____	_____
	_____	_____
	_____	_____

Bathroom

Bathtub/shower	_____	_____
Sink & counter	_____	_____
Medicine cabinet	_____	_____
Vent fan	_____	_____
Ceramic tile	_____	_____
Light fixture	_____	_____
Walls/ceiling & paint	_____	_____
Carpet/floor	_____	_____
Curtains or draperies	_____	_____
Windows	_____	_____
Closets	_____	_____
Shelves	_____	_____
Doors	_____	_____
Toilet	_____	_____
Other	_____	_____
	_____	_____
	_____	_____
	_____	_____

Bedroom No. 1

Doors	_____	_____
Windows & screens	_____	_____
Light fixture	_____	_____
Walls/ceiling paint	_____	_____

Carpet/floor	_____	_____
Closets	_____	_____
Curtains or draperies	_____	_____
Furniture	_____	_____
Shelves	_____	_____
Other	_____	_____
	_____	_____
	_____	_____

Bedroom No. 2

Doors	_____	_____
Windows & screens	_____	_____
Light fixture	_____	_____
Walls/ceiling & paint	_____	_____
Carpet/floor	_____	_____
Closets	_____	_____
Curtains or draperies	_____	_____
Furniture	_____	_____
Shelves	_____	_____
Other	_____	_____
	_____	_____
	_____	_____

Basement/storage

Windows	_____	_____
Walls/ceiling & paint	_____	_____
Closets	_____	_____
Floors	_____	_____
Doors	_____	_____
Other	_____	_____
	_____	_____
	_____	_____

Hallway(s)

Doors	_____	_____
Walls/ceiling & paint	_____	_____
Floors	_____	_____
Windows	_____	_____
Other	_____	_____
	_____	_____
	_____	_____

Stairwell

Doors	_____	_____
Walls/ceiling & paint	_____	_____
Floors	_____	_____
Windows	_____	_____
Railings	_____	_____
Other	_____	_____

Garage or parking area

Windows	_____	_____
Walls/ceiling	_____	_____
Shelves	_____	_____
Paint	_____	_____
Doors	_____	_____
Other	_____	_____

Date utilities notified

Gas company	_____	_____
Electric company	_____	_____
Water & sewer	_____	_____

Number of keys	_____	_____
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**RECEIPT FOR INVENTORY  
CHECKLIST AND LEASE**

Tenant acknowledges a copy of two Inventory checklists and a signed copy of the Lease for Premises located at \_\_\_\_\_. If one completed Checklist is not returned to Landlord within the 7 days from this date, the Landlord and Tenant agree that none of the real or personal property at the premises is damages or flawed in any way.

TENANT

Dated: \_\_\_\_\_

By: \_\_\_\_\_

## ITEMIZED LIST OF CHARGES

**RE:**

Tenant: \_\_\_\_\_

Forwarding Address \_\_\_\_\_

\_\_\_\_\_

Date list was mailed to the tenant \_\_\_\_\_

**CREDITS:**

1.	Security Deposit	\$ _____	
2.	Other	\$ _____	
		<b>TOTAL CREDITS:</b>	\$ _____

**CHARGES**

1.	Rental arrearage	\$ _____	
2.	Rent due for premature termination of the lease by the tenant	\$ _____	
3.	The tenant's utility bills not paid by the tenant	\$ _____	
4.	Damages to property and estimated cost of repair:		
	a. _____	\$ _____	
	b. _____	\$ _____	
	c. _____	\$ _____	
	d. _____	\$ _____	
	e. _____	\$ _____	
		<b>TOTAL CHARGES</b>	\$ _____

AMOUNT OWED TO THE TENANT (if charges are less than credits, the tenant is entitled to receive this amount) \$ \_\_\_\_\_

ADDITIONAL AMOUNT OWED TO THE LANDLORD (if credits are less than charges, the tenant owes this additional amount to the landlord) \$ \_\_\_\_\_

**You must respond to this notice by mail within 7 days after receipt of same; otherwise you will forfeit the amount claimed for damages.**