



**Montgomery County Housing
PRE-MOVE-IN Inspection
Checklist for Tenants**

Tenant Name: _____ **Program & Provider:** _____

Property Name & Address: _____

Unit: _____

MARK ITEM AS SATISFACTORY (S), UNSATISFACTORY (U), OR NOT APPLICABLE (N/A)

A housing locator or service provider must assist the tenant with completing an inspection during the walk through prior to move-in. This form should be utilized as a guide to record unit conditions before taking possession. In addition, this form along with attached pictures and/or videos, will be used as a prerequisite to record unit conditions for a property damage claim request and related reimbursement for repairs through the Landlord Risk Mitigation Fund Program (LRMF), if necessary.

ROOM / ITEMS	S	U	N/A	COMMENTS	REPAIRED
LIVING ROOM					
Floor/Carpet					
Blinds/Shades					
Walls & Ceilings					
Windows & Screens					
Door, Door Locks & Hardware					
Lighting Fixtures (<i>ensure all lights work</i>)					
Other					
KITCHEN					
Floor					
Walls & Ceilings					
Windows & Screen					
Garbage Disposal					
Cabinets					
Countertops					
Stove/Burners/Controls					
Oven/Range Hood/Inside-Outside					
Refrigerator					
Dishwasher					
Sink(s) <i>ensure there is hot water/check that water works</i>					
Lighting Fixtures (<i>ensure all lights work</i>)					

Other					
DINING ROOM					
Floor/Carpet					
Blinds/Shades					
Walls & Ceilings					
Windows & Screens					
Door, Door Locks & Hardware					
Lighting Fixture (s) (<i>ensure all lights work</i>)					
Other					
BATHROOM 1					
Floor					
Windows & Screen					
Walls & Ceilings					
Door, Door Locks & Hardware					
Lighting Fixture (s) (<i>ensure all lights work</i>)					
Bathtub/Shower (<i>ensure water works/check pressure</i>)					
Toilet (<i>ensure toilet is operable/flushes</i>)					
Sink/Vanity (<i>ensure water works/check pressure</i>)					
Other					
BATHROOM 2					
Floor					
Windows & Screen					
Walls & Ceilings					
Door, Door Locks & Hardware					
Lighting Fixture (s) (<i>ensure all lights work</i>)					
Bathtub/Shower (<i>ensure water works/check pressure</i>)					
Toilet (<i>ensure toilet is operable/flushes</i>)					
Sink/Vanity (<i>ensure water works/check pressure</i>)					
Other					
BEDROOM 1					
Floor/Carpet					
Blinds/Shades					
Walls & Ceilings					
Windows & Screens					
Closet					
Door, Door Locks & Hardware					
Lighting Fixture (s) (<i>ensure all lights work</i>)					

Other					
BEDROOM 2					
Floor/Carpet					
Blinds/Shades					
Walls & Ceilings					
Windows & Screens					
Closet					
Door, Door Locks & Hardware					
Lighting Fixture (s) (<i>ensure all lights work</i>)					
Other					
OTHER					
Basement Railings					
Egress Window					
Heating System					
Air Conditioning					
Smoke/Carbon Monoxide Alarms					
Outlets/Electrical					
Washer					
Dryer					

Tenant Signature:

Date:

Landlord/Property Manager:

Date:

Designated Service Provider:

Date:

If any item in the unit is not satisfactory, notify the property manager or landlord regarding the repairs that need to be done and have them initial and date on the appropriate row once the repairs are completed prior to move in. Please also ensure an updated picture and/or video is provided. Landlords, tenants, and service providers should keep a copy of this form for their records. Photos and/or videos should be emailed directly to Landlord Risk Mitigation Fund via LRMF@montgomerycountymd.gov