



Project Name \_\_\_\_\_

Management Agent Name \_\_\_\_\_

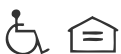
Tenant Name \_\_\_\_\_

Tenant Address \_\_\_\_\_

Date of Move-In/Move-Out/Annual Inspection \_\_\_\_\_

Category	*S/U	Comments	
		Move In/Move-Out	Annual
<b>Kitchen</b>			
Floor			
Walls/Ceilings			
Lights/Fixtures			
Faucet/Disposal			
Outlets/Switches			
Pantry			
Doors			
Dishwasher			
Refrigerator			
Oven/Range			
Cabinets/Counters			
Windows/Screens			
Sink			
<b>Living/Dining Room</b>			
Floor/Carpet			
Walls/Ceilings			
Lights/Fixtures			
Draperies/Blinds			
Windows/Screens			
Baseboards			
Closets			
Outlets/Switches			
Entry door(s)			
<b>Bathroom(s)</b>			
Floor			
Walls/Ceilings			
Windows/Screens			
Exhaust Fan			
Sink/Faucet			
Tub/Shower			
Lights/Fixtures			
Toilet			
Medicine Cabinet			
Towel bars			
Outlets/Switches			
Doors			
Linen Closet			

\* S=Satisfactory U=Unsatisfactory





Category	*S/U	Comments	
<b>Exterior</b>		<b>Move In/Move-Out</b>	<b>Annual</b>
Door			
Handrails			
Porch Lights			
Storage Areas			
<b>Bedroom 1</b>		<b>Move In/Move-Out</b>	<b>Annual</b>
Floor/Carpet			
Walls/Ceilings			
Lights/Fixtures			
Outlets/Switches			
Windows/Screens			
Closets			
Doors			
Draperies/Blinds			
<b>Bedroom 2</b>		<b>Move In/Move-Out</b>	<b>Annual</b>
Floor/Carpet			
Walls/Ceilings			
Lights/Fixtures			
Outlets/Switches			
Windows/Screens			
Closets			
Doors			
Draperies/Blinds			
<b>Bedroom 3</b>		<b>Move In/Move-Out</b>	<b>Annual</b>
Floor/Carpet			
Walls/Ceilings			
Lights/Fixtures			
Outlets/Switches			
Windows/Screens			
Closets			
Doors			
Draperies/Blinds			
<b>Bedroom 4</b>		<b>Move In/Move-Out</b>	<b>Annual</b>
Floor/Carpet			
Walls/Ceilings			
Lights/Fixtures			
Outlets/Switches			
Windows/Screens			
Closets			
Doors			
Draperies/Blinds			



Category	*S/U	Comments	
		Move In/Move-Out	Annual
<b>1/2 Bath</b>			
Floor			
Walls/Ceilings			
Windows/Screens			
Exhaust Fan			
Sink/Faucet			
Lights/Fixtures			
Toilet			
Medicine Cabinet			
Towel bars			
Outlets/Switches			
Doors			
Linen Closet			
<b>Miscellaneous</b>			
Smoke Detector			
Heating System			
Security System			



### Move In

I have inspected the above apartment prior to occupancy and accept it with the conditions noted. I recognize that I am responsible for keeping the apartment in good condition, with the exception of normal wear and tear.

Date: \_\_\_\_\_ # of Keys issued: \_\_\_\_\_

\_\_\_\_\_  
Tenant Signature

\_\_\_\_\_  
Tenant Signature

***Any deficiencies identified in this report will be remedied within 30 days of the date the tenant moves into the unit.***

\_\_\_\_\_  
Owner/Management Agent Signature

### Move Out

***I have vacated the above apartment and understand and agree that I am responsible for all damages and charges above normal wear and tear noted on the move out inspection.***

- Agree with move-out inspection**
- Disagree with move-out inspection**  
*If disagree, list specific items of disagreement.*

\_\_\_\_\_  
Date: \_\_\_\_\_ # of Keys issued: \_\_\_\_\_

\_\_\_\_\_  
Tenant Signature

\_\_\_\_\_  
Tenant Signature

\_\_\_\_\_  
Owner/Management Agent Signature

### Annual

***I have inspected the above apartment and accept it with the conditions noted. I recognize that I am responsible for keeping the apartment in good condition, with the exception of normal wear and tear.***

Date: \_\_\_\_\_

\_\_\_\_\_  
Tenant Signature

\_\_\_\_\_  
Tenant Signature

***Any deficiencies identified in this report will be remedied within 30 days of the date the tenant moves into the unit.***

\_\_\_\_\_  
Owner/Management Agent Signature

All fees and move out charges must be in compliance with OHFA's fee policy as outlined in OHFA's LIHTC Compliance Manual.

*Under penalties of perjury, I certify that the information provided herein is true and accurate to the best of my knowledge. The undersigned further understands that providing false representation herein constitutes fraud.*

