

# Move-In Tenant Inspection Summary

Date: **[Insert Date]**

Property Address: **[Insert Property Address]**

Tenant Name: **[Insert Tenant Name]**

Landlord/Property Manager: **[Insert Name]**

## Inspection Summary

Room/Area	Condition	Notes
Living Room	Acceptable	Minor scratches on the floor.
Kitchen	Good	Appliances clean and functioning.
Bathroom	Acceptable	Faucet needs tightening.
Bedroom 1	Good	No issues noted.
Bedroom 2	Good	No issues noted.

## Overall Assessment

The property is in acceptable condition overall, with minor issues that will be addressed prior to the tenant's full move-in.

## Tenant Acknowledgment

I, **[Insert Tenant Name]**, acknowledge that I have received and reviewed this move-in inspection summary.

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

## Landlord/Property Manager Acknowledgment

I, **[Insert Landlord/Manager Name]**, acknowledge that this inspection has been conducted and documented.

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