

KANSAS MOVE-IN CHECKLIST

INVENTORY CHECKLIST FOR _____

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 5 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 5 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 _____
 Security deposit deposited at _____
 Name(s) of the tenant(s) _____

	MOVE-IN Move-In Date:	MOVE-OUT 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/PARKING
AREA**

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

**DATE UTILITIES
NOTIFIED**

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

NUMBER OF KEYS _____

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 5 days from this date, the Landlord and Tenant agree that none of the real or personal property at the premises is damaged or flawed in any way.

TENANT _____ DATE _____

ITEMIZED LIST OF CHARGES

TENANT _____ DATE MAILED _____

FORWARDING ADDRESS _____

CREDITS

- 1. Security Deposit \$ _____
- 2. Other \$ _____

TOTAL CREDITS \$ _____

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. \$ _____

TOTAL CHARGES \$ _____

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 5 days after receipt of same; otherwise you will forfeit the amount claimed for damages.