

# NEW HAMPSHIRE MOVE-IN CHECKLIST

INVENTORY CHECKLIST FOR \_\_\_\_\_

You should complete one checklist, noting the condition of the rental property, and return it to the landlord after obtaining possession of the rental unit. You should keep a copy for your records. You must notify the landlord in writing 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:
	_____	_____
<b>KITCHEN</b>	_____	_____
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	_____	_____
 <b>DINING ROOM</b>		
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	_____	_____
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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 14 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 \_\_\_\_\_

DATE \_\_\_\_\_

**ITEMIZED LIST OF CHARGES**

TENANT \_\_\_\_\_ DATE MAILED \_\_\_\_\_

FORWARDING ADDRESS \_\_\_\_\_

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