

WISCONSIN MOVE-IN CHECKLIST

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

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	_____	_____

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DINING ROOM

Thermostat

Air conditioner

Door

Windows & screens

Walls/ceiling & paint

Carpet/floor

Curtains or draperies

Light fixture

Furniture

Closets

Shelves

Other

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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, 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 \_\_\_\_\_

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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) \$ \_\_\_\_\_