

Tenant(s): \_\_\_\_\_  
 Tenant(s): \_\_\_\_\_ et al (and all others)  
 Address: \_\_\_\_\_ Unit: \_\_\_\_\_  
 City: \_\_\_\_\_ OREGON Zip: \_\_\_\_\_

Poor (P) Fair (F) Good (G) Excellent (E) New (N) *Attach additional sheets for extra rooms, items or more detailed explanations.*

	IN	OUT		IN	OUT		IN	OUT
<b>GENERAL ITEMS</b>			<b>LIVING ROOM</b>			<b>BATHROOM</b>		
Walls			Fireplace			Towel Bars		
Windows/Screens						Sink & Vanity		
Drapes/Curtains/Shades			<b>KITCHEN</b>			Toilet		
Rods			Stove			Tub/Shower		
Floor			Broiler Pan/Racks			Shower Rod		
Carpet/Rugs			Refrigerator			Paper Holder		
Wood/Linoleum			Ice Trays			Soap Dish		
Light Fixtures/Bulbs			Shelves/Drawer			Mirror		
Doors/Woodwork			Disposal			<b>ESSENTIAL SERVICES</b>		
Knobs/Locks			Dishwasher			Plumbing		
Ceilings			Counter Tops			Heating		
Electrical Outlets			Cabinets			Electricity		
Garbage Cans			Sink			Hot Water		
TV Antenna/Cable						CO. & Smoke Alarm		
<b>BEDROOM 1</b>			<b>BEDROOM 2</b>			<b>BEDROOM 3</b>		
Walls			Walls			Walls		
Windows/Screens			Windows/Screens			Windows/Screens		
Drapes/Curtains/Blinds			Drapes/Curtains/Blinds			Drapes/Curtains/Blinds		
Rods			Rods			Rods		
Floor			Floor			Floor		
Carpet/Rugs			Carpet/Rugs			Carpet/Rugs		
Wood/Linoleum			Wood/Linoleum			Wood/Linoleum		
Light Fixtures/Bulbs			Light Fixtures/Bulbs			Light Fixtures/Bulbs		
Doors/Woodwork/Trim			Doors/Woodwork/Trim			Doors/Woodwork/Trim		
Knobs/Locks			Knobs/Locks			Knobs/Locks		
Ceilings			Ceilings			Ceilings		
Outlets			Outlets			Outlets		

**Further Explanation of Above Condition:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Utility companies to be notified by Tenant: \_\_\_\_\_  
 Number of keys provided to Tenant: \_\_\_\_\_ Number of garage door openers provided to Tenant: \_\_\_\_\_

**I/we accept this Rental Unit in the above condition:**

Tenant \_\_\_\_\_ Date \_\_\_\_\_  
 Tenant \_\_\_\_\_ Date \_\_\_\_\_

**I/we left the Rental Unit in the above condition:**

Tenant \_\_\_\_\_ Date \_\_\_\_\_  
 Tenant \_\_\_\_\_ Date \_\_\_\_\_

Forwarding Address \_\_\_\_\_

**I/we agree that all personal property remaining in the Rental Unit or on the property may be disposed of by the Owner/Agent without complying with the requirements of ORS 90:**

Tenant \_\_\_\_\_ Date \_\_\_\_\_

Tenant \_\_\_\_\_ Date \_\_\_\_\_



**SAMPLE**

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