



PRE-MOVE OUT INSPECTION STATEMENT (C.A.R. Form PMOI, Revised 4/03)

To: and any other occupants ("Tenant") in possession of the premises located at: (Street Address) 760 Locust St (Unit/Apartment #) (City) Redding (State) CA (Zip Code) 96001-2708 ("Premises").

- 1. Pursuant to California Civil Code § 1950.5, an inspection of the Premises was conducted by your landlord or the landlord's agent ("Landlord") on (Date).
2. The purpose of this inspection was to identify deficiencies in the Premises that need to be remedied by you in order to avoid certain deductions from your security deposit.
3. The following individuals were present at the inspection:
4. This Statement identifies items that need to be repaired or cleaned by you in order to avoid a deduction from your security deposit for those identified deficiencies.
5. You have an opportunity to remedy the identified deficiencies prior to the termination of your tenancy, however, you may do so only in a manner consistent with the rights and obligations established in your lease or rental agreement.
6. If you do not remedy the identified deficiencies, the Landlord may use the identified deficiencies as a bases for making a deduction from you security deposit.
7. Even if you remedy the identified deficiencies, the Landlord may make deductions from your security deposit for deficiencies that: (a) occur between the time of the inspection in paragraph 1 and the termination of your tenancy; and (b) were not revealed during the inspection in paragraph 1 due to the presence of your possessions.
8. The use of a Tenant's security deposit is controlled by California Law. California Civil Code § 1950.5(b) states:

As used in this section, "security" means any payment, fee, deposit or charge, including, but not limited to, any payment, fee, deposit, or charge, except as provided in Section 1950.6, that is imposed at the beginning of the tenancy to be used to reimburse the landlord for costs associated with processing a new tenant or that is imposed as an advance payment of rent, used or to be used for any purpose, including, but not limited to, any of the following:

- (1) The compensation of a landlord for a tenant's default in the payment of rent.
(2) The repair of damages to the premises, exclusive of ordinary wear and tear, caused by the tenant or by a guest or licensee of the tenant.
(3) The cleaning of the premises upon termination of the tenancy necessary to return the unit to the same level of cleanliness it was in at the inception of the tenancy.
(4) To remedy future defaults by the tenant in any obligation under the rental agreement to restore, replace, or return personal property or appurtenances, exclusive of ordinary wear and tear, if the security deposit is authorized to be applied thereto by the rental agreement.

9. California Civil Code § 1950.5(d) provides: "Any security shall be held by the landlord for the tenant who is party to the lease or agreement. The claim of a tenant to the security shall be prior to the claim of any creditor of the landlord."

I acknowledge receipt of a copy of each page of this Pre-Move Out Inspection Statement.

Tenant Date
Tenant Date
Tenant Forwarding Address

Tenant was not present during the inspection. Landlord left a copy of this Pre-Move Out Inspection Statement at the Premises.

Landlord Robert Brown Date
Address City Redding State CA Zip
Telephone Fax E-mail

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Reviewed by Date

When completing this form, check the Premises carefully and be specific in all items noted. Check the appropriate box:
S - SATISFACTORY/CLEAN O - OTHER *D - DEPOSIT DEDUCTION *if not corrected prior to move out

S O *D Comments

Front Yard/Exterior

| | | | | |
|-------------------|--------------------------|--------------------------|--------------------------|-------|
| Landscaping | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Fences/Gates | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Sprinklers/Timers | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Walks/Driveway | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Porches/Stairs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Mailbox | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Light Fixtures | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Building Exterior | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Entry

| | | | | |
|-----------------------|--------------------------|--------------------------|--------------------------|-------|
| Security/Screen Doors | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Doors/Knobs/Locks | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Flooring/Baseboards | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Walls/Ceilings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Light Fixtures/Fans | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Switches/Outlets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Living Room

| | | | | |
|-----------------------|--------------------------|--------------------------|--------------------------|-------|
| Doors/Knobs/Locks | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Flooring/Baseboards | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Walls/Ceilings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Window Coverings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Windows/Locks/Screens | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Light Fixtures/Fans | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Switches/Outlets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Fireplace/Equipment | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Dining Room

| | | | | |
|-----------------------|--------------------------|--------------------------|--------------------------|-------|
| Flooring/Baseboards | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Walls/Ceilings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Window Coverings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Windows/Locks/Screens | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Light Fixtures/Fans | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Switches/Outlets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |



S O *D Comments

Other Room

| | | | | |
|-----------------------|--------------------------|--------------------------|--------------------------|-------|
| Doors/Knobs/Locks | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Flooring/Baseboards | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Walls/Ceilings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Window Coverings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Windows/Locks/Screens | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Light Fixtures/Fans | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Switches/Outlets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Bedroom #

| | | | | |
|-----------------------|--------------------------|--------------------------|--------------------------|-------|
| Doors/Knobs/Locks | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Flooring/Baseboards | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Walls/Ceilings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Window Coverings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Windows/Locks/Screens | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Light Fixtures/Fans | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Switches/Outlets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Closets/Doors/Tracks | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Bedroom #

| | | | | |
|-----------------------|--------------------------|--------------------------|--------------------------|-------|
| Doors/Knobs/Locks | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Flooring/Baseboards | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Walls/Ceilings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Window Coverings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Windows/Locks/Screens | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Light Fixtures/Fans | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Switches/Outlets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Closets/Doors/Tracks | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Bedroom #

| | | | | |
|-----------------------|--------------------------|--------------------------|--------------------------|-------|
| Doors/Knobs/Locks | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Flooring/Baseboards | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Walls/Ceilings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Window Coverings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Windows/Locks/Screens | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Light Fixtures/Fans | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Switches/Outlets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Closets/Doors/Tracks | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Bedroom #

| | | | | |
|-----------------------|--------------------------|--------------------------|--------------------------|-------|
| Doors/Knobs/Locks | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Flooring/Baseboards | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Walls/Ceilings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Window Coverings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Windows/Locks/Screens | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Light Fixtures/Fans | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Switches/Outlets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Closets/Doors/Tracks | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |



| Bath # _____ | S | O | *D | Comments |
|--------------------------|--------------------------|--------------------------|--------------------------|----------|
| Doors/Knobs/Locks | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Flooring/Baseboards | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Walls/Ceilings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Window Coverings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Windows/Locks/Screens | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Light Fixtures | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Switches/Outlets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Toilet | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Tub/Shower | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Shower Door/Rail/Curtain | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Sink/Faucets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Plumbing/Drains | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Exhaust Fan | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Towel Rack(s) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Toilet Paper Holder | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Cabinets/Counters | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

| Bath # _____ | S | O | *D | Comments |
|--------------------------|--------------------------|--------------------------|--------------------------|----------|
| Doors/Knobs/Locks | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Flooring/Baseboards | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Walls/Ceilings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Window Coverings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Windows/Locks/Screens | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Light Fixtures | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Switches/Outlets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Toilet | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Tub/Shower | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Shower Door/Rail/Curtain | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Sink/Faucets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Plumbing/Drains | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Exhaust Fan | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Towel Rack(s) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Toilet Paper Holder | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Cabinets/Counters | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

| Bath # _____ | S | O | *D | Comments |
|--------------------------|--------------------------|--------------------------|--------------------------|----------|
| Doors/Knobs/Locks | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Flooring/Baseboards | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Walls/Ceilings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Window Coverings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Windows/Locks/Screens | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Light Fixtures | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Switches/Outlets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Toilet | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Tub/Shower | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Shower Door/Rail/Curtain | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Sink/Faucets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Plumbing/Drains | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Exhaust Fan | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Towel Rack(s) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Toilet Paper Holder | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Cabinets/Counters | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |



S O *D Comments

Kitchen

| | | | | |
|-----------------------|--------------------------|--------------------------|--------------------------|-------|
| Flooring/Baseboards | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Walls/Ceilings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Window Coverings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Windows/Locks/Screens | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Light Fixtures | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Switches/Outlets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Range/Fan/Hood | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Oven(s)/Microwave | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Refrigerator | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Dishwasher | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Sink/Disposal | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Faucet(s)/Plumbing | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Cabinets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Counters | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Hall/Stairs

| | | | | |
|---------------------|--------------------------|--------------------------|--------------------------|-------|
| Flooring/Baseboards | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Walls/Ceilings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Light Fixtures/Fans | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Switches/Outlets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Closets/Cabinets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Railings/Banisters | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Laundry

| | | | | |
|-------------------|--------------------------|--------------------------|--------------------------|-------|
| Faucets/Valves | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Plumbing/Drains | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Cabinets/Counters | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Systems

| | | | | |
|--------------------|--------------------------|--------------------------|--------------------------|-------|
| Furnace/Thermostat | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Air Conditioning | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Water Heater | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Water Softener | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Other _____



S O *D Comments

Garage/Parking

| | | | | |
|---------------------------|--------------------------|--------------------------|--------------------------|-------|
| Garage Door | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Other Door(s) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Driveway/Floor | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Cabinets/Counters | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Light Fixtures | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Switches/Outlets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Electrical/Exposed Wiring | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Window(s) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Other Storage/Shelving | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Back/Side/Yard

| | | | | |
|-----------------------|--------------------------|--------------------------|--------------------------|-------|
| Patio/Deck/Balcony | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Patio Cover(s) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Landscaping | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Sprinklers/Timers | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Pool/Heater/Equipment | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Spa/Cover/Equipment | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Fences/Gates | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Safety/Security

| | | | | |
|----------------------|--------------------------|--------------------------|--------------------------|-------|
| Smoke/CO Detector(s) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Security System | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| Security Window Bars | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

Personal Property

Keys/Remotes/Devices

| | |
|-----------------|-------|
| Keys | _____ |
| Remotes/Devices | _____ |

Attached Supplements _____

Tenant's Initials (_____) (_____)

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Reviewed by _____ Date _____

