DOMINGO PROPERTY MANAGEMENT

Check-in/Check-out Form 2171 Allston Way Berkeley, CA 94704 510-356-4642

310-330-4042				
PLEASE FILL OUT THIS FORM & RETURN TO OFFICE WITHIN 10 DAYS AFTER YOUR MOVE IN DATE				
We would like to welcome you as a new resident to our rental property. This checklist is for your benefit as well as ours. Please take the time to fill in the appropriate and applicable areas. Under California Civil Code 1950.5 your deposit money will be refunded				
only to the extent not used for cleaning, damages or back rent. *Remember that a 60-day notice of termination of the lease is required.				
Name:	Move-in Date:		Move-Out Date:	
Address:			Phone:	
LIVINGROOM & DINING ROOM	MOVE-IN CONDITIO	N MOVE-OUT CONDITION	COST TO CORRECT	
DOORS & LOCKS				
FLOORS & BASEBOARDS				
WALLS & CEILINGS				
WINDOWS & BLINDS				
ELECTRICAL FIXTURES				
ELECTRICAL SWITCHES & OUTLETS				
CLOSETS				
KITCHEN				
DOORS & LOCKS				
FLOORS & BASEBOARDS				
WALLS & CEILINGS				
WINDOWS & BLINDS				
ELECTRICAL FIXTURES (Lights, etc)				
ELECTRICAL SWITCHES & OUTLETS				
CABINETS				
RANGE & REFRIERATOR				
SINK & GARBAGE DISPOSAL				
DISHWASHER				
BEDROOM(S)				
DOORS & LOCKS				
FLOORS & BASEBOARDS				
WALLS & CEILINGS	-			
WINDOWS & BLINDS				
ELECTRICAL FIXTURES				
ELECTRICAL SWITCHES & OUTLETS				
CLOSETS				
BATHROOM(S)				
DOORS & LOCKS				
FLOORS & BASEBOARDS				
WALLS & CEILINGS				
WINDOWS & BLINDS				
ELECTRICAL FIXTURES (Fan, etc)				
ELECTRICAL SWITCHES, OUTLETS				
CLOSETS				
SHOWER FIXTURES				
LAVATORY & TUB				
TOILET				
TOWEL RACK & TP HOLDER				
	ed. Recident		Date:	
Move in inspection hereby accepted: Resident Date: Manager/agent: Date:				
Move out inspection hereby accepted: Resident Date: Date:			Date:	
Manager/agent: Date:				
CODES: *NCC-needs complete cleaning* *REP- replace* *SC- spot cleaning * * SP- spot painting* * RPR- repair*				