

## RENTER'S INSPECTION WORKSHEET

In anticipation of entering into a lease where Brad & Lara Brown (the "Landlord"), of 3604 Cattleman, Manchaca, TX 78652 will rent to \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, (the "Tenant", of \_\_\_\_\_, \_\_\_\_\_, TX 78\_\_\_\_\_, the premises described as:

\_\_\_\_\_  
Street, City, State Zip

The parties have each examined the premises and each agrees that the all items are in good, clean and sanitary order, and in good condition and repair, unless noted to the contrary in this checklist. Check list **MUST BE** signed and dated 7 days following moving date of the premises.

If the Landlord and Tenant do, in fact, enter into a Lease Agreement, then at the end of the lease term, Tenant agrees to return the premises in a condition that matches the condition of the premises at the beginning of the lease term, as reflected in this checklist, except for such deterioration that might result from normal use of the premises and furnishings.

As part of the consideration for the rental of the premises, Tenant voluntarily assumes the risk of any defects in the premises either known, or that should have been known to Tenant in the exercise of ordinary care at the beginning of the lease term, unless the Tenant gives written notice to Landlord to correct the defects, prior to entering into the Lease Agreement.

Descriptions of the damage must be specific in type and location. Pictures must be provided if requested by the landlord. The recommendation is to provide pictures for all damages recorded on this worksheet.

All payments must be made to Brad Brown. Payments not paid to the order of Brad Brown will not be accepted and must be resubmitted prior to the payment due date per your lease.

## KITCHEN

	OK (yes/no)	COMMENTS
Floors clean	_____	_____
Carpet	_____	_____
Sink		
Stopper	_____	_____
Strainer	_____	_____
Countertops	_____	_____
Cabinets	_____	_____
Exhaust fan works	_____	_____
Dishwasher	_____	_____
Refrigerator	_____	_____
Clean	_____	_____
Light	_____	_____
Trays and Shelves	_____	_____
Freezer	_____	_____
Microwave	_____	_____
Trash Compactor	_____	_____
Range	_____	_____
Range hood clean	_____	_____
Interior clean	_____	_____
Knobs	_____	_____
Pans/racks	_____	_____
Light switches	_____	_____
Bulbs	_____	_____
Windows	_____	_____
Screens	_____	_____
Drapes, curtains, blinds	_____	_____
Door	_____	_____
Locks	_____	_____
Latches	_____	_____
Surfaces	_____	_____
Walls	_____	_____
Ceiling	_____	_____
Smoke detector	_____	_____
Fire sprinkler, extinguisher	_____	_____
Overall Cleanliness	_____	_____
Other:		
_____	_____	_____
_____	_____	_____
_____	_____	_____

## LIVING ROOM

	OK (yes/no)	COMMENTS
Floors	_____	_____
Carpets	_____	_____
Lights	_____	_____
Windows	_____	_____
Screens	_____	_____
Walls	_____	_____
Ceiling	_____	_____
Drapes	_____	_____
Drapery rods	_____	_____
Blinds	_____	_____
Shades	_____	_____
Doors	_____	_____
Louvers intact	_____	_____
Locks	_____	_____
Latches	_____	_____
Surfaces	_____	_____
Doorstops	_____	_____
Fireplace	_____	_____
Flue clean	_____	_____
Ceiling fan	_____	_____
Smoke detector	_____	_____
Bookshelves	_____	_____
Light Switches	_____	_____
Overall Cleanliness	_____	_____
Other:	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## BATHROOM 1

Location: \_\_\_\_\_

	OK (yes/no)	COMMENTS
Toilet	_____	_____
Faucets	_____	_____
Sink	_____	_____
Stopper	_____	_____

Mirrors	_____	_____
Towel bars	_____	_____
Shower curtain rod	_____	_____
Shower curtain	_____	_____
Shower enclosure	_____	_____
Cabinet	_____	_____
Tile	_____	_____
Tile grouting	_____	_____
Tub caulking	_____	_____
Tub chips	_____	_____
Bulbs	_____	_____
Light Switches	_____	_____
Vent fan	_____	_____
Floors	_____	_____
Walls	_____	_____
Ceiling	_____	_____
Windows	_____	_____
Screens	_____	_____
Curtains	_____	_____
Blinds	_____	_____
Shades	_____	_____
Doors	_____	_____
Locks	_____	_____
Latches	_____	_____
Surfaces	_____	_____
Overall Cleanliness	_____	_____
Other:	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## BATHROOM 2

Location: \_\_\_\_\_

	OK (yes/no)	COMMENTS
Toilet	_____	_____
Faucets	_____	_____
Sink	_____	_____
Stopper	_____	_____
Mirrors	_____	_____
Towel bars	_____	_____
Shower curtain rod	_____	_____
Shower curtain	_____	_____

Shower enclosure	_____	_____
Cabinet	_____	_____
Tile	_____	_____
Tile grouting	_____	_____
Tub caulking	_____	_____
Tub chips	_____	_____
Bulbs	_____	_____
Light Switches	_____	_____
Vent fan	_____	_____
Floors	_____	_____
Walls	_____	_____
Ceiling	_____	_____
Windows	_____	_____
Screens	_____	_____
Curtains	_____	_____
Blinds	_____	_____
Shades	_____	_____
Doors	_____	_____
Locks	_____	_____
Latches	_____	_____
Surfaces	_____	_____
Overall Cleanliness	_____	_____
Other:	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### BATHROOM 3

Location: \_\_\_\_\_

	OK (yes/no)	COMMENTS
Toilet	_____	_____
Faucets	_____	_____
Sink	_____	_____
Stopper	_____	_____
Mirrors	_____	_____
Towel bars	_____	_____
Shower curtain rod	_____	_____
Shower curtain	_____	_____
Shower enclosure	_____	_____
Cabinet	_____	_____
Tile	_____	_____
Tile grouting	_____	_____

Tub caulking	_____	_____
Tub chips	_____	_____
Bulbs	_____	_____
Light Switches	_____	_____
Vent fan	_____	_____
Floors	_____	_____
Walls	_____	_____
Ceiling	_____	_____
Windows	_____	_____
Screens	_____	_____
Curtains	_____	_____
Blinds	_____	_____
Shades	_____	_____
Doors	_____	_____
Locks	_____	_____
Latches	_____	_____
Surfaces	_____	_____
Overall Cleanliness	_____	_____
Other:	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**BEDROOM 1**

Location: \_\_\_\_\_

	OK (yes/no)	COMMENTS
Walls	_____	_____
Floors	_____	_____
Carpets	_____	_____
Ceiling	_____	_____
Lights	_____	_____
Light Switches	_____	_____
Windows	_____	_____
Screens	_____	_____
Curtains	_____	_____
Blinds	_____	_____
Shades	_____	_____
Doors	_____	_____
Locks	_____	_____
Latches	_____	_____
Surfaces	_____	_____
Closets	_____	_____
Smoke alarm	_____	_____
Overall Cleanliness	_____	_____

Other:

_____	_____	_____
_____	_____	_____
_____	_____	_____

## BEDROOM 2

Location: \_\_\_\_\_

	OK (yes/no)	COMMENTS
Walls	_____	_____
Floors	_____	_____
Carpets	_____	_____
Ceiling	_____	_____
Lights	_____	_____
Light Switches	_____	_____
Windows	_____	_____
Screens	_____	_____
Curtains	_____	_____
Blinds	_____	_____
Shades	_____	_____
Doors	_____	_____
Locks	_____	_____
Latches	_____	_____
Surfaces	_____	_____
Closets	_____	_____
Smoke alarm	_____	_____
Overall Cleanliness	_____	_____
Other:		
_____	_____	_____
_____	_____	_____
_____	_____	_____

## BEDROOM 3

Location: \_\_\_\_\_

	OK (yes/no)	COMMENTS
Walls	_____	_____
Floors	_____	_____
Carpets	_____	_____
Ceiling	_____	_____
Lights	_____	_____

Light Switches	_____	_____
Windows	_____	_____
Screens	_____	_____
Curtains	_____	_____
Blinds	_____	_____
Shades	_____	_____
Doors	_____	_____
Locks	_____	_____
Latches	_____	_____
Surfaces	_____	_____
Closets	_____	_____
Smoke alarm	_____	_____
Overall Cleanliness	_____	_____
Other:		
_____	_____	_____
_____	_____	_____
_____	_____	_____

## HALLWAY 1

Location: \_\_\_\_\_

	OK (yes/no)	COMMENTS
Floor	_____	_____
Walls	_____	_____
Stairway	_____	_____
Closets	_____	_____
Ceiling	_____	_____
Light switches	_____	_____
Bulbs	_____	_____
Windows	_____	_____
Doors	_____	_____
Locks	_____	_____
Latches	_____	_____
Surfaces	_____	_____
Smoke alarm	_____	_____
Overall Cleanliness	_____	_____
Other:		
_____	_____	_____
_____	_____	_____
_____	_____	_____



## HALLWAY 2

Location: \_\_\_\_\_

	OK (yes/no)	COMMENTS
Floor	_____	_____
Walls	_____	_____
Stairway	_____	_____
Closets	_____	_____
Ceiling	_____	_____
Light switches	_____	_____
Bulbs	_____	_____
Windows	_____	_____
Doors	_____	_____
Locks	_____	_____
Latches	_____	_____
Surfaces	_____	_____
Smoke alarm	_____	_____
Overall Cleanliness	_____	_____
Other:	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## UTILITY ROOM

	OK (yes/no)	COMMENTS
Washer	_____	_____
Serial Number	_____	_____
Hookup	_____	_____
Dryer	_____	_____
Serial Number	_____	_____
Hookup	_____	_____
Heating Unit	_____	_____
Serial Number	_____	_____
Ducts	_____	_____
Central Air Conditioning	_____	_____
Filter	_____	_____
Balcony	_____	_____
Stairways	_____	_____
Attic fan or whole house fan	_____	_____
TV antenna/cable	_____	_____
Cable outlet 1	_____	_____
Location	_____	_____

Cable outlet 2	_____	_____
Location	_____	_____
Cable outlet 3	_____	_____
Location	_____	_____
Cable outlet 4	_____	_____
Location	_____	_____
Telephone wiring	_____	_____
Attic access	_____	_____
Attic ventilation	_____	_____
Attic insulation	_____	_____
Rodents	_____	_____
Insects	_____	_____
Radon Gas	_____	_____
Other:	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## GARAGE

	OK (yes/no)	COMMENTS
Vehicle Door	_____	_____
Electric Opener	_____	_____
Serial Number	_____	_____
Tracks	_____	_____
Remote Opener-1	_____	_____
Remote Opener-2	_____	_____
Remote Opener-3	_____	_____
Stop/reverse function	_____	_____
Walls	_____	_____
Windows	_____	_____
Floor	_____	_____
Light switches	_____	_____
Bulbs	_____	_____
Overall Cleanliness	_____	_____
Floor drain	_____	_____
Other:	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## EXTERIOR OF STRUCTURE

	OK (yes/no)	COMMENTS
Carport	_____	_____
Storage Room	_____	_____
Siding	_____	_____
Roof	_____	_____
Shingles	_____	_____
Awning	_____	_____
Driveway	_____	_____
Sidewalks	_____	_____
Steps	_____	_____
Railings	_____	_____
Landscaping	_____	_____
Trees	_____	_____
Shrubs	_____	_____
Flowers	_____	_____
Fences	_____	_____
Edging	_____	_____
Mulch	_____	_____
Lawn	_____	_____
Weeds	_____	_____
Patches	_____	_____
Insects	_____	_____
Trimming	_____	_____
Animal deposits	_____	_____
Ornaments	_____	_____
Other buildings	_____	_____
Window wells	_____	_____
Window well covers	_____	_____
Storm windows	_____	_____
Trim	_____	_____
Screens	_____	_____
Main entry door	_____	_____
Deck/patio door	_____	_____
Other exterior doors	_____	_____
Patio	_____	_____
Deck/porch	_____	_____
Gutters	_____	_____
Downspouts	_____	_____
Electrical meter	_____	_____
Air conditioner	_____	_____
Nameholders	_____	_____
Doorbell	_____	_____

Mailbox	_____	_____
Lightning		
arrestors	_____	_____
Other:		
_____	_____	_____
_____	_____	_____
_____	_____	_____

# Safety Worksheet

This inspection worksheet is to verify all items listed here are in place and functional. Please make a note if any of the items are either missing or not functional at the time of inspection or testing the item. For items that do not apply, enter N/A.

All doors exterior doors are rekeyed between tenants move-in. Rekeying doors is available at tenants request and expense after initial move-in.

\_\_\_\_\_ Fire Extinguisher (Kitchen) –

\_\_\_\_\_ Verify the kitchen fire extinguisher is present and accessible in the kitchen.

\_\_\_\_\_ Verify the fire extinguisher is appropriate for use within the kitchen and elsewhere.

(Generally, fire extinguishers rated for kitchen use are white in color.)

\_\_\_\_\_ Verify fire extinguisher gauge shows to be full

\_\_\_\_\_ Fire Extinguisher (Extra) – Not appropriate for use within the kitchen

\_\_\_\_\_ Verify there exists a 2nd fire extinguisher, generally located in the laundry room.

\_\_\_\_\_ Verify fire extinguisher gauge shows to be full

\_\_\_\_\_ A door knob lock or keyed dead bolt is installed (not lower than 36” and not higher than 54” from the floor)

\_\_\_\_\_ Front door

\_\_\_\_\_ Back door

\_\_\_\_\_ Garage Door (if present)

\_\_\_\_\_ Keyless Deadbolt is installed (not lower than 36” and not higher than 54” from the floor)

\_\_\_\_\_ Front door

\_\_\_\_\_ Back door

\_\_\_\_\_ Garage Door (if present)

\_\_\_\_\_ Smoke detectors - All smoke detectors present and functional. It is the tenant’s obligation to keep working batteries in all smoke detectors working with good batteries and inform landlord at anytime a smoke detector is not function after attempting to replace the battery.

\_\_\_\_\_ Specify the number of smoke detectors present within your dwelling

\_\_\_\_\_ At least one smoke detector is located outside, but in the vicinity of, each separate bedroom in the dwelling.

\_\_\_\_\_ Each smoke detector has a working battery installed.

\_\_\_\_\_ Each smoke detector has been tested and verified working. To test a smoke detector, press the test button and verify that it and all other smoke detectors create an audible warning. Contact your landlord if further instructions are needed to understand how to appropriately test your smoke detectors.

\_\_\_\_\_ Door viewer - A permanently installed device in an exterior door that allows a person inside the dwelling to view a person outside the door. (A) a clear glass pane or one-way mirror; or (B) a peephole having a barrel with a one-way lens of glass or other substance providing an angle view of not less than 160 degrees.

- \_\_\_\_\_ Front door
- \_\_\_\_\_ Back door
- \_\_\_\_\_ Garage Door (if present)

\_\_\_\_\_ Window latch on each exterior window of the dwelling is present and functional

\_\_\_\_\_ A sliding door handle latch or a sliding door security bar (not lower than 48” and not higher than 54” from the floor), if sliding door is present.

\_\_\_\_\_ Sliding door pin - A lock on a sliding glass door that consists of a pin or nail inserted from the interior side of the door at the side opposite the door ’s handle and that is designed to prevent the door from being opened or lifted, if a sliding door is present.

\_\_\_\_\_ Carbon Monoxide Detectors - All carbon monoxide detectors are present and functional. It is the tenant’s obligation to keep working batteries in all carbon monoxide detectors and inform landlord at anytime a carbon monoxide detectors is not functional after attempting to replace the battery.

\_\_\_\_\_ Specify the number of carbon monoxide detectors present within your dwelling

\_\_\_\_\_ Each carbon monoxide detectors has a working battery installed.

\_\_\_\_\_ Each carbon monoxide detectors has been tested and verified working. To test a carbon monoxide detectors, press the test button and verify that it and all other carbon monoxide detectors / smoke detectors create an audible warning. Contact your landlord if further instructions are needed to understand how to appropriately test your carbon monoxide detectors.

\_\_\_\_\_ List the locations of your carbon monoxide detectors

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Property Location:

Street: \_\_\_\_\_ City: \_\_\_\_\_, Texas

Tenants Name (Print):

Tenants Name (Signature):

Date:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Landlord:

Received:

\_\_\_\_\_  
\_\_\_\_\_

Tenant agrees to test the detector at least once a month and to report any problems to Landlord in writing. If the detector is battery operated, Tenant agrees to replace the battery as necessary with a new alkaline battery (unless applicable laws require otherwise).

Initialed by:

\_\_\_\_\_  
Tenant 1      Tenant 2      Tenant 3

Landlord and Tenant hereby acknowledge that they have each read this checklist and agree that the condition and contents of the above-mentioned rental dwelling are, without exception, as represented in this checklist. Tenant understands that Tenant is liable for any damage done to this dwelling as outlined in the Lease Agreement. Both parties acknowledge receiving a copy of this checklist within 14 days of move in.

LANDLORD:

Brad & Lara Brown

\_\_\_\_\_  
Brad & Lara Brown      Date: \_\_\_\_\_

TENANT:

\_\_\_\_\_  
Tenant 1      Date: \_\_\_\_\_

\_\_\_\_\_  
Tenant 2      Date: \_\_\_\_\_

\_\_\_\_\_  
Tenant 3      Date: \_\_\_\_\_

## **Final Checklist for Renter's Inspection Worksheet**

### **Make It Legal**

- \_\_\_\_\_ When the inspection and the Worksheet have been completed, the Worksheet should be dated and signed by both the Landlord(s) and the Tenant(s).
- \_\_\_\_\_ The Smoke Detector Section should be separately initialed by the Tenant at the time that the detector is tested.

### **Copies**

Give a signed copy of the Renter's Inspection Worksheet to:

\_\_\_\_\_ , \_\_\_\_\_ , \_\_\_\_\_

\_\_\_\_\_ Brad & Lara Brown

### **Reasons to Update**

- \* Changes in condition of rental property.
- \* Improvements made to property by the Landlord.



## Safety Worksheet

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All doors exterior doors are rekeyed between tenants move-in. Rekeying doors is available at tenants request and expense after initial move-in.

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\_\_\_\_\_ Verify the kitchen fire extinguisher is present and accessible in the kitchen.

\_\_\_\_\_ Verify the fire extinguisher is appropriate for use within the kitchen and elsewhere.

(Generally, fire extinguishers rated for kitchen use are white in color.)

\_\_\_\_\_ Verify fire extinguisher gauge shows to be full

\_\_\_\_\_ Fire Extinguisher (Extra) – Not appropriate for use within the kitchen

\_\_\_\_\_ Verify there exists a 2nd fire extinguisher, generally located in the laundry room.

\_\_\_\_\_ Verify fire extinguisher gauge shows to be full

\_\_\_\_\_ A door knob lock or keyed dead bolt is installed (not lower than 36” and not higher than 54” from the floor)

\_\_\_\_\_ Front door

\_\_\_\_\_ Back door

\_\_\_\_\_ Garage Door (if present)

\_\_\_\_\_ Keyless Deadbolt is installed (not lower than 36” and not higher than 54” from the floor)

\_\_\_\_\_ Front door

\_\_\_\_\_ Back door

\_\_\_\_\_ Garage Door (if present)

\_\_\_\_\_ Smoke detectors - All smoke detectors present and functional. It is the tenant’s obligation to keep working batteries in all smoke detectors working with good batteries and inform landlord at anytime a smoke detector is not function after attempting to replace the battery.

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\_\_\_\_\_ At least one smoke detector is located outside, but in the vicinity of, each separate bedroom in the dwelling.

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to view a person outside the door. (A) a clear glass pane or one-way mirror; or (B) a peephole having a barrel with a one-way lens of glass or other substance providing an angle view of not less than 160 degrees.

\_\_\_\_\_ Front door

\_\_\_\_\_ Back door

\_\_\_\_\_ Garage Door (if present)

\_\_\_\_\_ Window latch on each exterior window of the dwelling is present and functional

\_\_\_\_\_ A sliding door handle latch or a sliding door security bar (not lower than 48" and not higher than 54" from the floor), if sliding door is present.

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\_\_\_\_\_ Specify the number of carbon monoxide detectors present within your dwelling

\_\_\_\_\_ Each carbon monoxide detectors has a working battery installed.

\_\_\_\_\_ Each carbon monoxide detectors has been tested and verified working. To test a carbon monoxide detectors, press the test button and verify that it and all other carbon monoxide detectors / smoke detectors create an audible warning. Contact your landlord if further instructions are needed to understand how to appropriately test your carbon monoxide detectors.

\_\_\_\_\_ List the locations of your carbon monoxide detectors

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Property Location:

Street: \_\_\_\_\_ City: \_\_\_\_\_, Texas

Tenants Name (Print):

Tenants Name (Signature):

Date:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Landlord:

Received:

\_\_\_\_\_  
\_\_\_\_\_

Initialed for identification by Tenants \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ and Landlord \_\_\_\_\_

Sec. 92.153