## TENANT ROUTINE INSPECTION REPORT



Please complete **ALL** details and circle where required and leave the report on the kitchen table or bench top.

PROPERTY: DATE:/	
TENAI	NT/S:
HOME PHONE: () MOBILE NUMBER:	
EMAIL	L ADDRESS:
Do yo	u wish to re-new your Tenancy Agreement (if applicable)? YES or NO 12 months or 6 months
Pleas	e CIRCLE YES or NO to indicate if there is maintenance required on the property:
1.	Are there any leaks under the kitchen sink? YES or NO Specify:
2.	Are there any leaks under the bathroom wash basins? YES or NO Specify:
3.	Are there any leaks from the shower? YES or NO Specify:
4.	Are there any leaks affecting walls or cupboards? YES or NO Specify:
5.	Are there any leaks from the hot water system? YES or NO Specify:
6.	Are there any leaks from the toilet? YES or NO Specify:
7.	Are there any leaks from the roof onto the ceiling? YES or NO Specify:
8.	Are there any rips or tears in the carpet? YES or NO Specify:
9.	Are there any power points that are faulty or not working? YES or NO Specify:
10.	Are there any lights that are not working? YES or NO Specify:
11.	Are there any faults with the stove, oven or griller? YES or NO Specify:
12.	Are there any windows or doors that are not secure? YES or NO Specify:
13.	Are there any problems with the guttering or downpipes? YES or NO Specify:
14.	Are there any steps, railings or balconies not secure? YES or NO Specify:
15.	Is there any evidence of dry rot at the property? YES or NO Specify:
16.	Are any fences, retaining walls or gates not secure? YES or NO Specify:
17.	Are there any loose or damaged tiles in the property? YES or NO Specify:
18.	Are there any fly screens missing from the windows? YES or NO Specify:
19.	Do any of the fly screens have holes in the mesh? YES or NO Specify:
20.	Do you have any pets? YES or NO Type and how many:
21.	Has there been a change in tenants occupying the property? YES or NO
If <b>YES</b> ,	, please advise details:
Other	Information:
Tenan	nt/s Signature: Date: / /
Tenan	nt/s Signature: Date