

**GABLES COURT**  
 6880 SW 44<sup>th</sup> Street, Suite 100  
 Miami, Florida, 33155  
 Phone: 305.667.4414  
 Fax: 305.667.4497

**MUST RETURN WITHIN 2 DAYS**

**OF MOVE-IN**

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**MOVE-IN/MOVE-OUT REPORT**

Resident: 0 0  
 Building: 0 Unit #: 0  
 Move In Date: January 0, 1900  
 Move Out Date:

The premises are being delivered in clean, sanitary, and good operating condition, with no spots, stains, marks or damages, unless otherwise noted below in the "Move In Exceptions" box.

ITEM	MOVE-IN EXCEPTIONS	MOVE OUT CONDITION
<b>Living Room</b>		
Walls/Ceiling		
Floor/Carpet		
Doors/Locks		
Lights/Mirrors		
Blinds		
Windows/Tracks/Screens		
Other		
<b>Dining &amp; Halls</b>		
Walls/Ceiling		
Floor/Carpet		
Closets/Doors/Locks		
Lights/Mirrors		
Blinds		
Other		
<b>Master Bedroom:</b>		
Walls/Ceiling		
Floor/Carpet		
Closets		
Doors/Locks		
Lights/Mirrors		
Blinds		
Windows/Tracks/Screens		
Other		
<b>Second Bedroom:</b>		
Walls/Ceiling		
Floor/Carpet		
Closets/Doors/Locks		
Lights/Mirrors		
Blinds		
Windows/Tracks/Screens		
Other:		
<b>Master Bathroom</b>		
Walls/Ceiling		
Floor/Carpet		
Closets/Doors/Locks		
Lights/Mirrors		
Blinds		
Countertops		
Other:		
<b>Second Bathroom</b>		
Walls/Ceiling		
Floor/Carpet		
Closets/Doors/Locks		
Lights/Mirrors		
Blinds		
Windows/Tracks/Screens		
Countertops		
<b>Kitchen</b>		
Walls/Ceiling		
Floor/Carpet		
Cabinets		
Lights/Mirrors		
Refrigerator		
Stove/Oven		
Dishwasher		
Disposal		
Hood/Fan		
Microwave		
Countertops		
Other		
<b>Washer/Dryer</b>		
Heat/Air Conditioning		
Balcony/Deck/Patio		
Storage/Parking Area		
Garden/Plants/Grass		
Smoke Detectors		
Alarm System		
Number of Keys:		

Unit	Entry	Mailbox	Other	Clicker/Gate Cards	Unit	Entry	Mailbox	Other	Clicker/Gate Cards
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Resident has inspected the above premises prior to occupancy and accepts it with the conditions and/or exceptions noted above. Resident agrees to deliver the premises in like condition upon termination of tenancy, normal wear and tear excepted.

Resident: \_\_\_\_\_ Date: \_\_\_\_\_ Resident: \_\_\_\_\_ Date: \_\_\_\_\_  
 Management: \_\_\_\_\_ Date: \_\_\_\_\_ Management: \_\_\_\_\_ Date: \_\_\_\_\_