| **Maintenance Checklist** | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Note**: Place a check mark ( ) beside the items that are okay. Write in what needs to be done and what was done beside the items that need/needed repair. (Approximate time to complete 2-6 hours)  Property: Apartment No.: | | | | | | | | | | | |
| **Front Door:** | | | | | | **Back Door:** | | | | | |
|  |  | | | | |  |  | | | | |
|  | Closes correctly | | | | |  | Closes correctly | | | | |
|  | Weather stripping | | | | |  | Weather stripping | | | | |
|  | Door stops | | | | |  | Deadbolt | | | | |
|  | Deadbolt | | | | |  | Keyless lock | | | | |
|  | Keyless lock | | | | |  |  | | | | |
|  | Peephole | | | | |  |  | | | | |
|  | Door Paint | | | | |  |  | | | | |
|  | Lock re-keyed or changed (initial) | | | | |  |  | | | | |
|  | 2 Keys ready for door lock and mail box | | | | |  |  | | | | |
|  | | | | | | | | | | | |
| Other: | | | | | | | | | | | |
| **Living Room:** | | | | **Fireplace:** | | | | | **Sliding Glass Doors:** | | |
|  | Light & Fixtures | | |  | Dampers | | | |  | | Rolls smoothly |
|  | Tile/Flooring | | |  | Screens | | | |  | | Locks easily |
|  | Bookcase/Other | | |  | Grates | | | |  | | Lock pins/Bars |
|  | Blinds/Verticals | | |  | Paint | | | |  | | Screens |
|  | | | | | | | | | | | |
| Other: | | | | | | | | | | | |
| **Dining Room:** | | | | | | **Den:** | | | | | |
|  | Light & Fixtures | | | | |  | Light & Fixtures | | | | |
|  | Shelves/Cabinets | | | | |  | Shelves/Cabinets | | | | |
|  | Screens | | | | |  | Screens | | | | |
|  | Doors | | | | |  | Doors | | | | |
|  | | | | | | | | | | | |
| Other: | | | | | | | | | | | |
| **Smoke Alarm/Fire Extinguisher:** | | | | | | **Washer/Dryer Room:** | | | | | |
|  | Battery good (Y/N) | | | | |  | Washer/Dryer connections | | | | |
|  | Circuitry test good | | | | |  | Dryer vent clear | | | | |
|  | Extinguisher fully charged | | | | |  | Shelving | | | | |
|  |  | | | | |  | Doors | | | | |
|  |  | | | | |  | Flooring | | | | |
|  | | | | | | | | | | | |
| **Outside Utility Room:** | | | | | | **Patio or Balcony:** | | | | | |
|  | Condition or doors | | | | |  | Patio light/globe | | | | |
|  | Shelf | | | | |  | Paint | | | | |
|  | Paint/Sheetrock | | | | |  | Hand rail | | | | |
|  | | | | | | | | | | | |
| Other: | | | | | | | | | | | |
| **Disposal:** | | | | | | **Kitchen Plumbing:** | | | | | |
|  | Clear & Free | | | | |  | Leaking faucets | | | | |
|  | Reset not tripped | | | | |  | Aerators missing or stopped up | | | | |
|  | Stopper in place | | | | |  | Leaking drains | | | | |
|  | Switch works | | | | |  | Stoppers & pop-ups | | | | |
|  | Splash guard | | | | |  | Sink no damage & strainers & covers | | | | |
|  | Check operation | | | | |  | Caulking | | | | |
| **Maintenance Checklist** | | | | | | | | | | | |
| **Stove:** | | | | | | **Kitchen Floor/Cabinets/Drawer Fronts:** | | | | | |
|  | Vent hood works, all speeds & light | | | | |  | Floor tile good | | | | |
|  | Burner work | | | | |  | Caulk & moldings at floor | | | | |
|  | Indicator lights | | | | |  | Caulk & cabinet connections | | | | |
|  | Oven racks | | | | |  | Broken/sagging shelves | | | | |
|  | Broiler pan in stove | | | | |  | Drawers slide easily | | | | |
|  | | | | | | | | | | | |
| **Bathrooms 1-2** | | | | | | | | | | | |
| **-1** | **-2** |  | | | | **-1** | **-2** |  | | | |
|  |  | Toilet seats | | | |  |  | Lights & Fixtures | | | |
|  |  | Toilet working & flappers good | | | |  |  | Cabinets/drawers work | | | |
|  |  | Sink stopper working | | | |  |  | Shower rods & ends | | | |
|  |  | Leaky pipes (& ck under sink) | | | |  |  | Door stops | | | |
|  |  | Tub stopper works | | | |  |  | Medicine cabinet | | | |
|  |  | Hot/cold water in sink | | | |  |  | Mirror(s) | | | |
|  |  | Hot/cold water in tub | | | |  |  | Linen closet shelves | | | |
|  |  | Aerators clean | | | |  |  | Caulking (remove old & re-caulk) | | | |
|  |  | Shower head | | | |  |  | Shower walls grouted | | | |
|  |  | Sink not damaged | | | |  |  | Door locks work | | | |
|  |  | Pop-ups, screens, & stoppers | | | |  |  | Toilet paper holder | | | |
|  |  | Cabinet shelves broken/sagging | | | |  |  | Toilet paper roller | | | |
|  |  | Tile & flooring | | | |  |  | Towel bar(s) | | | |
|  | | | | | | | | | | | |
| Other: | | | | | | | | | | | |
| **Bedrooms 1-2-3** | | | | | | | | | | | |
| **-1** | **-2** | **-3** |  | | | **-1** | **-2** | **-3** | |  | |
|  |  |  | Lights & fixtures | | |  |  |  | | Blinds/Verticals | |
|  |  |  | Screens | | |  |  |  | | Window locks | |
|  |  |  | Closet poles | | |  |  |  | | Caulk windows | |
|  |  |  | Closet shelves | | |  |  |  | | Water spots | |
|  |  |  | Door stops | | |  |  |  | | Sheetrock repairs | |
|  | | | | | | | | | | | |
| Other: | | | | | | | | | | | |
| **Electric Panel:** | | | | | | | | | | | |
|  | Check/tighten all connections | | | | |  | Compound aluminum connections | | | | |
|  | | | | | | | | | | | |
| **Heating & Cooling Systems:** | | | | | | | | | | | |
|  | Change & check filter | | | | |  | Check electrical connections | | | | |
|  | Thermostat loose or broken | | | | |  | Blower wheel alignment & tightness | | | | |
|  | Check/Clean evaporator & drain lines | | | | |  | Tightness of all covers evaporator/drain | | | | |
|  | Clean drain lines & check pan | | | | |  | Air return/Registers/Covers | | | | |
|  | Heat works | | | | |  | Clean condenser & check blade freedom/tight | | | | |
|  | Cool works | | | | |  | Covers & insulation in place | | | | |
|  | | | | | | | | | | | |
| Other: | | | | | | | | | | | |
| **Water Heater:** | | | | | | | | | | | |
|  | Check for leaks | | | | |  | Check correct thermostat setting for leaks | | | | |
|  | Connections tight/pan/rust | | | | |  | Check for operation | | | | |
|  | | | | | | | | | | | |
| Other: | | | | | | | | | | | |
| **Carpet:** | | | | | | **Paint/Sheetrock/Moldings/Other** | | | | | |
|  | Seams & spots | | | | |  | Ceiling painted (if necessary) | | | | |
|  | Base board | | | | |  | Baseboards | | | | |
|  | Carpet replacement (Y/N) | | | | |  | Sheetrock repair | | | | |
|  | Tack strips or Z bar | | | | |  | Hardware, other fixtures, etc. | | | | |
|  | | | | | | | | | | | |
| Other:  Maintenance Person’s Signature: Date: | | | | | | | | | | | |

IREMFIRST Disclaimer Statement

**DISCLAIMER:** These sample forms and agreements are not endorsed by BRP Education™. They are presented for informational purposes only and should not be relied upon for accuracy, completeness or consistency with applicable law. The user is advised to check all applicable state and federal law before using these forms, agreements, or parts thereof. Because certain forms have legal implications (e.g., management agreements, rental applications), it is recommended that downloaded versions of such forms should be reviewed with legal counsel prior to their use and that any modifications made by the user should also be reviewed by legal counsel.