

Retail Space Condition Inspection

General Information

Property Address

Date of Inspection

Inspected By

Tenant Name

Unit / Suite No.

Inspection Checklist

Area/Item	Condition	Comments
Flooring	<input type="text"/>	<input type="text"/>
Walls	<input type="text"/>	<input type="text"/>
Ceiling	<input type="text"/>	<input type="text"/>
Doors	<input type="text"/>	<input type="text"/>
Windows	<input type="text"/>	<input type="text"/>
Lighting	<input type="text"/>	<input type="text"/>
HVAC	<input type="text"/>	<input type="text"/>
Restrooms	<input type="text"/>	<input type="text"/>

Electrical	<div><div></div><div></div></div>	<div><div></div><div></div></div>
Other	<div><div></div><div></div></div>	<div><div></div><div></div></div>

Comments / Notes

Inspector Signature

Date