

Commercial Property Move-Out Inspection Form

Property & Tenant Information

Property Address

Tenant/Business Name

Unit/Suite #

Inspection Date

Move-Out Date

Inspector Name

Inspection Checklist

Area/Item	Condition	Notes
Floors	<input type="text"/>	<input type="text"/>
Walls & Ceilings	<input type="text"/>	<input type="text"/>
Windows & Doors	<input type="text"/>	<input type="text"/>
Lighting & Fixtures	<input type="text"/>	<input type="text"/>
Restrooms	<input type="text"/>	<input type="text"/>
HVAC & Mechanical	<input type="text"/>	<input type="text"/>
Kitchen/Break Room	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>

Keys/Access Devices Returned

Number of Keys Returned

Access Devices Returned

Additional Comments

Signatures

Inspector Signature

Date

Tenant/Business Representative Signature

Date