

Property visit check list

Property address

Tenant name

Joint tenant name

Tenant contact details

Date of visit

| Area | Condition | Comments/ action required |
|---------------------|--------------------------|---------------------------|
| Front garden / yard | Acceptable/ Unacceptable | |
| Hallway | Acceptable/ Unacceptable | |
| Living room | Acceptable/ Unacceptable | |
| Dining room | Acceptable/ Unacceptable | |
| Kitchen | Acceptable/ Unacceptable | |
| Separate WC | Acceptable/ Unacceptable | |
| Stairs and landing | Acceptable/ Unacceptable | |
| Bathroom | Acceptable/ Unacceptable | |
| Bedroom one | Acceptable/ Unacceptable | |
| Bedroom two | Acceptable/ Unacceptable | |
| Bedroom three | Acceptable/ Unacceptable | |
| Bedroom four | Acceptable/ Unacceptable | |
| Rear garden/ yard | Acceptable/ Unacceptable | |
| Garage | Acceptable/ Unacceptable | |
| Other: | | |
| | | |

| Equipment | Condition | Comments/ action required |
|---------------------------|----------------------|----------------------------------|
| Smoke detectors | Working/ Not working | |
| Carbon monoxide detectors | Working/ Not working | |
| Boiler | Working/ Not working | |
| Radiator thermostats | Working/ Not working | |
| Kitchen extractor fan | Working/ Not working | |
| Bathroom extractor fan | Working/ Not working | |
| Security alarm | Working/ Not working | |
| Security lights | Working/ Not working | |
| Shower | Working/ Not working | |
| Oven/ grill | Working/ Not working | |
| White goods | Working/ Not working | |
| Small electrical items | Working/ Not working | |
| Other: | | |
| | | |

| General | Condition | Comments/ action required |
|------------------------|--------------------------|----------------------------------|
| Electrical fittings | Acceptable/ Unacceptable | |
| Circuit board | Acceptable/ Unacceptable | |
| Drains and waste pipes | Acceptable/ Unacceptable | |
| WC | Acceptable/ Unacceptable | |
| Bins and refuge | Acceptable/ Unacceptable | |
| Access routes | Acceptable/ Unacceptable | |
| Other: | | |
| | | |

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|--------------------|
| Date of next visit |
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