Furnished Unit Inventory - 4 Bedroom

This Checklist should be filled out and returned within 72 hours of check-in. To be completed at check-out.

Tenant: _____

Address: _____

Lease Dates: _____

Check-In Date: _____ Check-Out Date: _____

Kitchen

QTY	Description	CHECK-IN *Please Initial* QTY	Office	Tenant	CHECK-OUT *Please Initial* QTY	Office	Tenant
4	Placemats						
1	Toaster						
1	Coffee Maker						
1	Mixer						
1	Spice Rack						
1	Set Mixing Spoons						
1	Set of Glassware						
1	Silverware Divider						
1	Dutch Oven						
1	Pizza Pan						
2	Dish Towels						
2	Dish Cloths						
1	Oven Mitt						
2	Saucepans						
1	20 Piece Silverware						
2	Fry Pans						
1	Set of Serving Pieces						
1	16 Pieve Dish Set						
1	Cutting Board						
1	5-Piece Pitcher Set						
1	Set Chiller Bowls						
1	Set of Salt/Petter Shakers						
1	Paper Towel Holder						
1	Knife Block						
1	Refrigerator						
1	Stove						
1	Microwave						
1	Garbage Disposal						

Master Bathroom

QTY	Description
2	Set of Sheets
1	Mattress Pad
2	Bed Pillows
1	Blanket
1	Queen Mattress
1	Queen Box Springs
1	Queen Bed Rails
1	Headboard
1	Clock Radio
1	Side Table
1	Chest of Drawers
1	Lamp
1	Mirror

CHECK-IN
Please Initial

QTY	Office	Tenant

CHECK-OUT
Please Initial

QTY	Office	Tenant

Upstairs Bathroom

QTY	Description
2	Bath Towels
2	Hand Towels
2	Wash Clothes
1	Bath Rug
1	Shower Rod
1	Shower Curtain
1	Set of Rings
1	Waste Basket
1	Soap Dish
1	Toothbrush Holder
1	Toilet Brush

CHECK-IN
Please Initial

QTY	Office	Tenant

CHECK-OUT
Please Initial

QTY	Office	Tenant

Downstairs Bathroom

QTY	Description
2	Bath Towels
2	Hand Towels
2	Wash Clothes
1	Bath Rug
1	Shower Rod
1	Shower Curtain
1	Set of Rings
1	Waste Basket
1	Soap Dish
1	Toothbrush Holder
1	Toilet Brush

CHECK-IN
Please Initial

QTY	Office	Tenant

CHECK-OUT
Please Initial

QTY	Office	Tenant

Master Bedroom

QTY	Description
2	Set of Sheets
1	Mattress Pad
2	Bed Pillows
1	Blanket
1	Queen Mattress
1	Queen Box Springs
1	Queen Bed Rails
1	Headboard
1	Clock Radio
1	Side Table
1	Chest of Drawers
1	Lamp
1	Mirror

CHECK-IN
Please Initial

QTY	Office	Tenant

CHECK-OUT
Please Initial

QTY	Office	Tenant

Sitting Bedroom

QTY	Description
1	Computer Desk with Chair

CHECK-IN
Please Initial

QTY	Office	Tenant

CHECK-OUT
Please Initial

QTY	Office	Tenant

Bedroom #2

QTY	Description
1	Set of Sheets
1	Mattress Pad
2	Bed Pillows
1	Blanket
1	Queen Mattress
1	Queen Box Springs
1	Queen Bed Rails
1	Headboard
1	Side Table
1	Chest of Drawers
1	Lamp
1	Mirror

CHECK-IN
Please Initial

QTY	Office	Tenant

CHECK-OUT
Please Initial

QTY	Office	Tenant

Bedroom #3 (Office or Bedroom)

QTY	Description
1	Set of Sheets
1	Mattress Pad
1	Bed Pillows
1	Blanket
1	Queen Mattress
1	Queen Box Springs
1	Queen Bed Rails
1	Headboard
1	Side Table
1	Chest of Drawers
1	Lamp
1	Mirror
1	Computer Desk with Chair

CHECK-IN
Please Initial

QTY	Office	Tenant

CHECK-OUT
Please Initial

QTY	Office	Tenant

Bedroom #4

QTY	Description
1	Set of Sheets
1	Mattress Pad
2	Bed Pillows
1	Blanket
1	Queen Mattress
1	Queen Box Springs
1	Queen Bed Rails
1	Headboard
1	Side Table
1	Chest of Drawers
1	Lamp
1	Mirror

CHECK-IN
Please Initial

QTY	Office	Tenant

CHECK-OUT
Please Initial

QTY	Office	Tenant

Living Room/Dining Area

QTY	Description
1	Dining Room Table w/ 4 Chairs
1	Sofa with Love Seat/Chair
1	End Table
1	Cocktail Table
1	19” Color T.V.
1	VCR
1	DVD Player

CHECK-IN
Please Initial

QTY	Office	Tenant

CHECK-OUT
Please Initial

QTY	Office	Tenant

Miscellaneous

QTY	Description	CHECK-IN *Please Initial* QTY	Office	Tenant	CHECK-OUT *Please Initial* QTY	Office	Tenant
1	Iron						
1	Ironing Board						
1	Mop						
1	Broom						
1	Dust Pan						
1	Vacuum						
1	Doormat						
2	Telephones						
1	Fire Extinguisher						
2	Smoke Detectors						
2	Phone Books						
1	Columbia City Map						
20	Coat Hangers						
1	Washer						
1	Dryer						

I, the undersigned, agree that the items stated to be in the home at the time of check-in to be true and accurate.

_____ _____
Tenant Date

_____ _____
Tenant Date

_____ _____
Southern Properties LLC Date

I, the undersigned, agree that the items stated to be in the home at the time of check-out to be true and accurate.

_____ _____
Tenant Date

_____ _____
Tenant Date

_____ _____
Southern Properties LLC Date

Comments/Notes: