

FORM 7-13 Make-Ready Checklist

[company logo, name, and address]

Property	Apartment No.	Apartment Type	Move-In Date
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Note that the Make-Ready Checklist should be used in conjunction with the Unit Inspection Report (Form 3-11). Items in need of repair may require replacement or renovation. Approval for replacement or renovations should be discussed with the property manager.

Item	By "	Target Completion Date	Actual Completion Date	Notes
GENERAL				
Review move-in/out inspection				
Review unit inspection report				
Replace door locks				
Complete preliminary cleaning				
Exterminate				
Clean fireplace				
Repair ceilings and trim				
Repair doors and hardware				
Repair windows, screens, hardware				
Clean and stain woodwork				
Paint walls, ceilings, trim				
Clean/Replace light fixtures				
Check/Replace light bulbs				
Clean/Replace electrical outlets and switch plates				
Repair/Replace screens, windows, hardware				
Clean windows, screens, hardware				
Lubricate doors and window hardware				
Clean/Replace drapes/blinds/shades				
Clean closets				
Check/ Replace shelves/ rods				
Repair floor coverings				
Clean/Shampoo/Replace/Repair carpets				
Clean entrance/halls				
Clean/Paint railings				
Check/Repair number on door mailbox				
Check/Repair balcony/patio				

(continued)

Item	By	Target Completion Date	Actual Completion Date	Notes
KITCHEN				
Test appliances				
Clean kitchen appliances				
Defrost and clean refrigerator				
Check/Replace ice maker/holders				
Clean oven, burners, rings, controls, drip pans				
Check/Clean sink				
Clean drawers and cabinets				
Clean/Wax or polish kitchen floor				
BATHROOM(S)				
Check/Repair tile				
Check/Repair grout				
Check/Repair sink, shower, toilet				
Check/Repair towel rack, rods, etc.				
Check/Repair glass and mirrors				
Clean, wax or polish bathroom tile				
OTHER EQUIPMENT				
Check heating equipment				
Check air-conditioning unit(s)				
Clean/replace filters				
Check hot water heater				
Check smoke/fire alarms				
Check door bell				
WRAP-UP				
Final cleaning				
Review unit inspection report				
Perform final inspection				
Sign certificate of readiness				
Place certificate in apartment				
(1) Use initials of person(s) responsible for work.				
Notes:		Prepared	By	Date
		Reviewed	_____	_____
		Reviewed	_____	_____