

Ultimate Apartment Hunting Checklist by NavigatingEverydayAdventures.com

Address: _____ Community: _____

Contact: _____ Agency: _____

Phone: _____ Fax: _____ Email: _____

| | |
|----------------|-----------------------------------|
| # of Bedrooms | |
| # of Baths | |
| Square Footage | |
| What Floor? | |
| Available | |
| Lease | <input type="checkbox"/> 12 Month |
| | <input type="checkbox"/> 6 Month |
| | <input type="checkbox"/> Monthly |
| | <input type="checkbox"/> |

| | |
|-------------------|----|
| Rent | \$ |
| Security Deposit | \$ |
| Application Fee | \$ |
| Holding Deposit | \$ |
| Clearances | \$ |
| Pet Rent | \$ |
| Pet Deposit | \$ |
| Other Fees | \$ |
| Rent | \$ |
| Total for Move-In | \$ |

| Included? | Yes | No | Average Cost/Month & Notes |
|------------------|--------------------------|--------------------------|----------------------------|
| Electric | <input type="checkbox"/> | <input type="checkbox"/> | |
| Gas | <input type="checkbox"/> | <input type="checkbox"/> | |
| Water | <input type="checkbox"/> | <input type="checkbox"/> | |
| Cable | <input type="checkbox"/> | <input type="checkbox"/> | |
| Internet | <input type="checkbox"/> | <input type="checkbox"/> | |
| Trash | <input type="checkbox"/> | <input type="checkbox"/> | |
| Lawn Care | <input type="checkbox"/> | <input type="checkbox"/> | |
| Exterminator | <input type="checkbox"/> | <input type="checkbox"/> | |
| HVAC Maintenance | <input type="checkbox"/> | <input type="checkbox"/> | |

| Nearby | Yes | No | Notes |
|---------------|--------------------------|--------------------------|-------|
| Park/Trails | <input type="checkbox"/> | <input type="checkbox"/> | |
| Dog Park | <input type="checkbox"/> | <input type="checkbox"/> | |
| Gym | <input type="checkbox"/> | <input type="checkbox"/> | |
| Close to Work | <input type="checkbox"/> | <input type="checkbox"/> | |
| Close to Bus | <input type="checkbox"/> | <input type="checkbox"/> | |
| Extra Parking | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |

| | | | | |
|-------------------------|--------------------------------------|---------------------------------------|---------------------------------------|--------------------------------------|
| Laundry: | <input type="checkbox"/> In Unit | <input type="checkbox"/> Hook-Ups | <input type="checkbox"/> None | <input type="checkbox"/> Clothesline |
| AC: | <input type="checkbox"/> Central Air | <input type="checkbox"/> Window | <input type="checkbox"/> None | |
| Heat: | <input type="checkbox"/> Heat Pump | <input type="checkbox"/> Propane | <input type="checkbox"/> Gas | <input type="checkbox"/> Electric |
| Parking/# Spots: | <input type="checkbox"/> Garage | <input type="checkbox"/> Carport | <input type="checkbox"/> Driveway | <input type="checkbox"/> Street |
| Storage: | <input type="checkbox"/> Coat Closet | <input type="checkbox"/> Linen Closet | <input type="checkbox"/> Pantry | <input type="checkbox"/> |
| Windows | <input type="checkbox"/> Double Pane | <input type="checkbox"/> Screens | <input type="checkbox"/> Lock OK | <input type="checkbox"/> |
| Safety | <input type="checkbox"/> Deadbolts | <input type="checkbox"/> Peephole | <input type="checkbox"/> Doorman | <input type="checkbox"/> Peephole |
| Outdoors: | <input type="checkbox"/> Porch | <input type="checkbox"/> Deck | <input type="checkbox"/> Patio | <input type="checkbox"/> Balcony |
| | <input type="checkbox"/> Yard | <input type="checkbox"/> Fenced Yard | <input type="checkbox"/> Rooftop Area | <input type="checkbox"/> |

| Living Room | Yes | No | Notes |
|----------------|--------------------------|--------------------------|-------|
| Size | | | |
| Flooring Type | | | |
| Cell Coverage | <input type="checkbox"/> | <input type="checkbox"/> | |
| Enough Outlets | <input type="checkbox"/> | <input type="checkbox"/> | |
| Outlets Work | <input type="checkbox"/> | <input type="checkbox"/> | |
| Cable Outlet | <input type="checkbox"/> | <input type="checkbox"/> | |
| Internet Ready | <input type="checkbox"/> | <input type="checkbox"/> | |
| Fireplace | <input type="checkbox"/> | <input type="checkbox"/> | |
| Furniture Fit | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | |

| Kitchen | Yes | No | Notes/Age of Appliances |
|----------------------|--------------------------|--------------------------|-------------------------|
| Size | | | |
| Flooring Type | | | |
| Stove/Oven | <input type="checkbox"/> | <input type="checkbox"/> | |
| Gas Stove | <input type="checkbox"/> | <input type="checkbox"/> | |
| Refrigerator/Freezer | <input type="checkbox"/> | <input type="checkbox"/> | |
| Dishwasher | <input type="checkbox"/> | <input type="checkbox"/> | |
| Microwave | <input type="checkbox"/> | <input type="checkbox"/> | |
| Enough Cupboards | <input type="checkbox"/> | <input type="checkbox"/> | |
| Extra Storage | <input type="checkbox"/> | <input type="checkbox"/> | |
| Ceiling Fan | <input type="checkbox"/> | <input type="checkbox"/> | |
| Exhaust Fan | <input type="checkbox"/> | <input type="checkbox"/> | |
| Outlets Work | <input type="checkbox"/> | <input type="checkbox"/> | |
| Enough Outlets | <input type="checkbox"/> | <input type="checkbox"/> | |
| Sink Drain OK | <input type="checkbox"/> | <input type="checkbox"/> | |

| Misc. | Yes | No | Yes | No |
|---------------------------|--------------------------|--------------------------|-----------------|--------------------------|
| Elevator | <input type="checkbox"/> | <input type="checkbox"/> | Water Heater OK | <input type="checkbox"/> |
| Reliable Maintenance Dept | <input type="checkbox"/> | <input type="checkbox"/> | Smoke Detectors | <input type="checkbox"/> |

| Bedroom #1 | Yes | No | Notes | Bedroom #2 | Yes | No | Notes | Bedroom #3 | Yes | No | Notes |
|-----------------|--------------------------|--------------------------|-------|-----------------|--------------------------|--------------------------|-------|-----------------|--------------------------|--------------------------|-------|
| Size | | | | Size | | | | Size | | | |
| Closet | <input type="checkbox"/> | <input type="checkbox"/> | | Closet | <input type="checkbox"/> | <input type="checkbox"/> | | Closet | <input type="checkbox"/> | <input type="checkbox"/> | |
| Outlets Work | <input type="checkbox"/> | <input type="checkbox"/> | | Outlets Work | <input type="checkbox"/> | <input type="checkbox"/> | | Outlets Work | <input type="checkbox"/> | <input type="checkbox"/> | |
| Ceiling Fan | <input type="checkbox"/> | <input type="checkbox"/> | | Ceiling Fan | <input type="checkbox"/> | <input type="checkbox"/> | | Ceiling Fan | <input type="checkbox"/> | <input type="checkbox"/> | |
| Blinds/Curtains | <input type="checkbox"/> | <input type="checkbox"/> | | Blinds/Curtains | <input type="checkbox"/> | <input type="checkbox"/> | | Blinds/Curtains | <input type="checkbox"/> | <input type="checkbox"/> | |
| Cell Coverage | <input type="checkbox"/> | <input type="checkbox"/> | | Cell Coverage | <input type="checkbox"/> | <input type="checkbox"/> | | Cell Coverage | <input type="checkbox"/> | <input type="checkbox"/> | |
| Cable Outlet | <input type="checkbox"/> | <input type="checkbox"/> | | Cable Outlet | <input type="checkbox"/> | <input type="checkbox"/> | | Cable Outlet | <input type="checkbox"/> | <input type="checkbox"/> | |
| Internet Ready | <input type="checkbox"/> | <input type="checkbox"/> | | Internet Ready | <input type="checkbox"/> | <input type="checkbox"/> | | Internet Ready | <input type="checkbox"/> | <input type="checkbox"/> | |
| Flooring | | | | Flooring | | | | Flooring | | | |

| Bathroom #1 | Yes | No | Notes | Bathroom #1 | Yes | No | Notes |
|---------------|--------------------------|--------------------------|-------|---------------|--------------------------|--------------------------|-------|
| Size | | | | Size | | | |
| Flooring | | | | Flooring | | | |
| 2 Sinks | <input type="checkbox"/> | <input type="checkbox"/> | | 2 Sinks | <input type="checkbox"/> | <input type="checkbox"/> | |
| Tub | <input type="checkbox"/> | <input type="checkbox"/> | | Tub | <input type="checkbox"/> | <input type="checkbox"/> | |
| Shower | <input type="checkbox"/> | <input type="checkbox"/> | | Shower | <input type="checkbox"/> | <input type="checkbox"/> | |
| Toilet OK | <input type="checkbox"/> | <input type="checkbox"/> | | Toilet OK | <input type="checkbox"/> | <input type="checkbox"/> | |
| Shutoff OK | <input type="checkbox"/> | <input type="checkbox"/> | | Shutoff OK | <input type="checkbox"/> | <input type="checkbox"/> | |
| Drains OK | <input type="checkbox"/> | <input type="checkbox"/> | | Drains OK | <input type="checkbox"/> | <input type="checkbox"/> | |
| GFCI Outlets | <input type="checkbox"/> | <input type="checkbox"/> | | GFCI Outlets | <input type="checkbox"/> | <input type="checkbox"/> | |
| Outlets Work | <input type="checkbox"/> | <input type="checkbox"/> | | Outlets Work | <input type="checkbox"/> | <input type="checkbox"/> | |
| Exhaust Fan | <input type="checkbox"/> | <input type="checkbox"/> | | Exhaust Fan | <input type="checkbox"/> | <input type="checkbox"/> | |
| Closet | <input type="checkbox"/> | <input type="checkbox"/> | | Closet | <input type="checkbox"/> | <input type="checkbox"/> | |
| Natural Light | <input type="checkbox"/> | <input type="checkbox"/> | | Natural Light | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | | | <input type="checkbox"/> | <input type="checkbox"/> | |
| | <input type="checkbox"/> | <input type="checkbox"/> | | | <input type="checkbox"/> | <input type="checkbox"/> | |

| Additional | Yes | No | Notes |
|-----------------|--------------------------|--------------------------|-------|
| Noise Level OK | <input type="checkbox"/> | <input type="checkbox"/> | |
| Signs of Vermin | <input type="checkbox"/> | <input type="checkbox"/> | |
| Overall Clean | <input type="checkbox"/> | <input type="checkbox"/> | |
| Visitor Parking | <input type="checkbox"/> | <input type="checkbox"/> | |
| Repairs Needed | <input type="checkbox"/> | <input type="checkbox"/> | |

Overall Impressions & Notes: _____
