



303-522-0042

ecapropertymanagement@gmail.com

NEW RESIDENT INSPECTION REPORT SHEET

RESIDENT:

PHONE:

DATE

CELL:

This form must be completed and returned to ECA Property Management in 7 days or less, please keep a copy for your records

BE AS SPECIFIC AS POSSIBLE

6 4th Ave Longmont 80501 Unit #	CONDITION ON ARRIVAL
LIVING / DINING	
Floor / Floor Covering/ Baseboards	
Walls /Ceiling	
Door(s) / Locks/ Screen door	
Window(s) / Screen(s)	
Light(s) /Switches/ Outlets	
Closets	
Other	
Kitchen	
Floor / Floor Covering/ Baseboards	
Walls & Ceiling	
Cabinets/Counters	
Light(s) /Switches/ Outlets	
Appliances	
Range Hood	
Sink/Disposal	
Other	
HALLS/STAIRWAYS	
Floor / Floor Covering/ Baseboards	
Light(s) /Switches/ Outlets	
Walls /Ceiling	
Closets	
Other	
BATHROOM #1	
Floor / Floor Covering/ Baseboards	
Walls & Ceilings	
Sink / Faucet / Towel Bars	
Cabinets / Mirror/ Door	
Bathtub / Shower / Faucets	
Toilet / Tile / Grout	

Light /Switches /Outlets	
Window / Screens	
Other	
BEDROOM #1	
Floor / Floor Covering/ Baseboards	
Walls /Ceiling	
Door(s) / Locks	
Window(s) / Screen(s)	
Light(s) /Switches/ Outlets	
Closets	
Other	
GENERAL	
Pest/Rodent	
OTHER	
Heating System	
Patio, Terrace, Deck	
Parking Areas	

RESIDENT SIGNATURE

Ok for ECA Property Management to enter to do repairs when tenants are not home? **YES NO**