



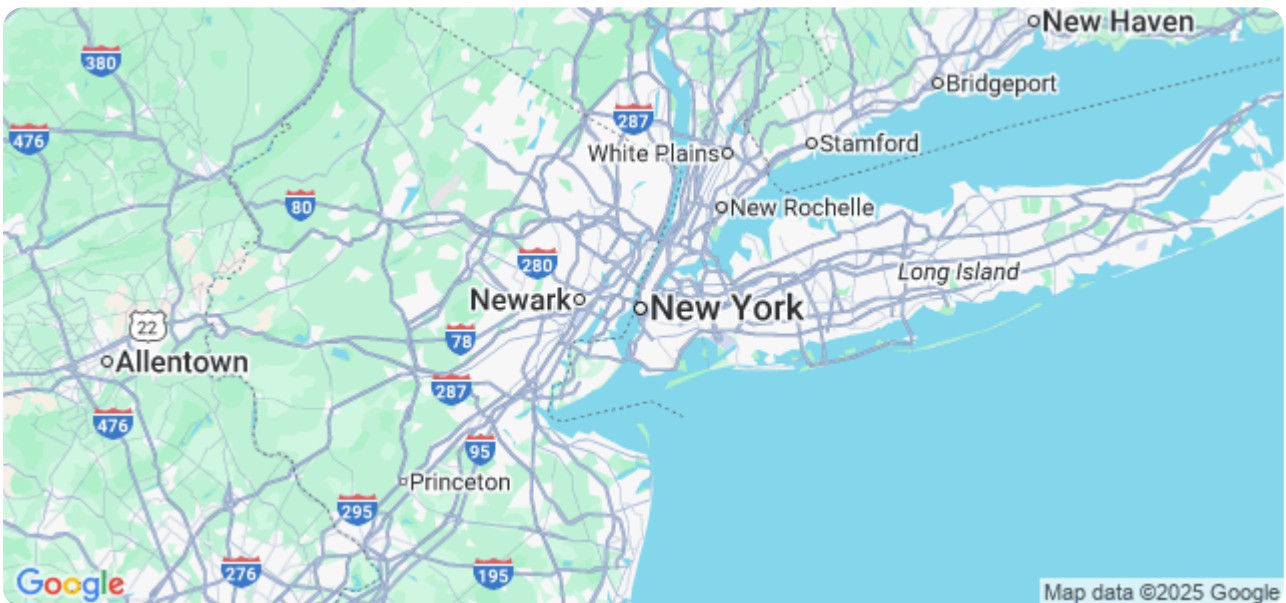
Preventative Maintenance Checklist for Rental Properties

Exterior Inspection

Check for structural issues, landscaping concerns, and potential hazards.

Property Address

 [Set My Current Location](#)



Inspection Date

Enter date...

Exterior Temperature (Fahrenheit)

Enter a number...


Overall Condition

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor

Detailed Observations (e.g., cracks, peeling paint)

Write something...

Exterior Photos (evidence of observations)

 Upload File

Siding Condition

- ☐ Good
- ☐ Fair
- ☐ Poor
- ☐ N/A

Recommendations for Improvements

Write something...

Roof & Gutters

Inspect for leaks, damage, and debris accumulation.

Inspection Date

Enter date...

Roof Material

Write something...

Shingle Condition (1-10, 10 being excellent)

Enter a number...

Description of any roof damage observed (cracks, missing shingles, etc.)

Write something...

Gutter Issues?

- ☐ Clogged
- ☐ Detached
- ☐ Rust
- ☐ Sagging
- ☐ None

Photo of Roof/Gutter Condition

 Upload File

Action Required (e.g., Cleaning, Repair, Replacement)

Write something...

Date of Next Inspection

Enter date...

HVAC System

Check filters, coils, and overall system performance.

Last Filter Change Date

Enter date...

Filter Size (inches)

Enter a number...

Supply Air Temperature (degrees F)

Enter a number...

Return Air Temperature (degrees F)

Enter a number...

Refrigerant Level

- ☐ Normal
- ☐ Low
- ☐ High

System Operation

- ☐ Normal
- ☐ Noisy
- ☐ Malfunctioning

Notes and Observations

Write something...

Plumbing

Inspect pipes, fixtures, and look for leaks or signs of corrosion.

Last Plumbing Inspection Date

Enter date...

Water Heater Condition

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor

Water Pressure (PSI)

Enter a number...


Description of any observed leaks or issues

Write something...

Faucet Functionality

- ☐ Optimal
- ☐ Minor Drip
- ☐ Significant Leak
- ☐ Not Working

Photos of plumbing areas (if applicable)

 Upload File

Pipe Diameter (inches) - if applicable

Enter a number...

Electrical System

Check outlets, switches, and look for electrical hazards.

Voltage Reading (V)

Enter a number...

Outlet Condition

- ☐ Good
- ☐ Cracked/Damaged
- ☐ Loose
- ☐ Not Working

Switch Condition

- ☐ Good
- ☐ Stiff
- ☐ Not Working
- ☐ Damaged

Circuit Breaker Amperage (A)

Enter a number...

Notes on Electrical System

Write something...

Last Electrical Inspection Date

Enter date...

Appliances

Inspect appliances for proper function and cleanliness.

Refrigerator Functionality

- ☐ Working Properly
- ☐ Cooling Issues
- ☐ No Power
- ☐ Leaking

Oven/Stove Functionality

- ☐ Working Properly
- ☐ Burner Issues
- ☐ Temperature Problems
- ☐ No Power

Dishwasher Cycle Time (Minutes)

Enter a number...

Notes on Washer/Dryer Condition

Write something...

Last Appliance Maintenance Date

Enter date...

Interior Surfaces

Check walls, floors, and ceilings for damage or wear.

Wall Condition Notes

Write something...

Number of Cracks Observed (Walls)

Enter a number...

Floor Condition (Living Room)

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor

Ceiling Condition (Kitchen)

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor

Date of Last Painting

Enter date...

Damage Types Observed (Floors)

- ☐ Scratches
- ☐ Stains
- ☐ Chips
- ☐ Loose Tiles

Notes on Doors and Trim

Write something...

Safety Systems

Test smoke detectors, carbon monoxide detectors, and fire extinguishers.

Smoke Detector Last Inspection Date

Enter date...

Carbon Monoxide Detector Last Inspection Date

Enter date...

Smoke Detector Battery Status (1-10, 10 being full)

Enter a number...

Carbon Monoxide Detector Battery Status (1-10, 10 being full)

Enter a number...

Smoke Detector Functioning?

- ☐ Yes
- ☐ No
- ☐ N/A

Carbon Monoxide Detector Functioning?

- ☐ Yes
- ☐ No
- ☐ N/A

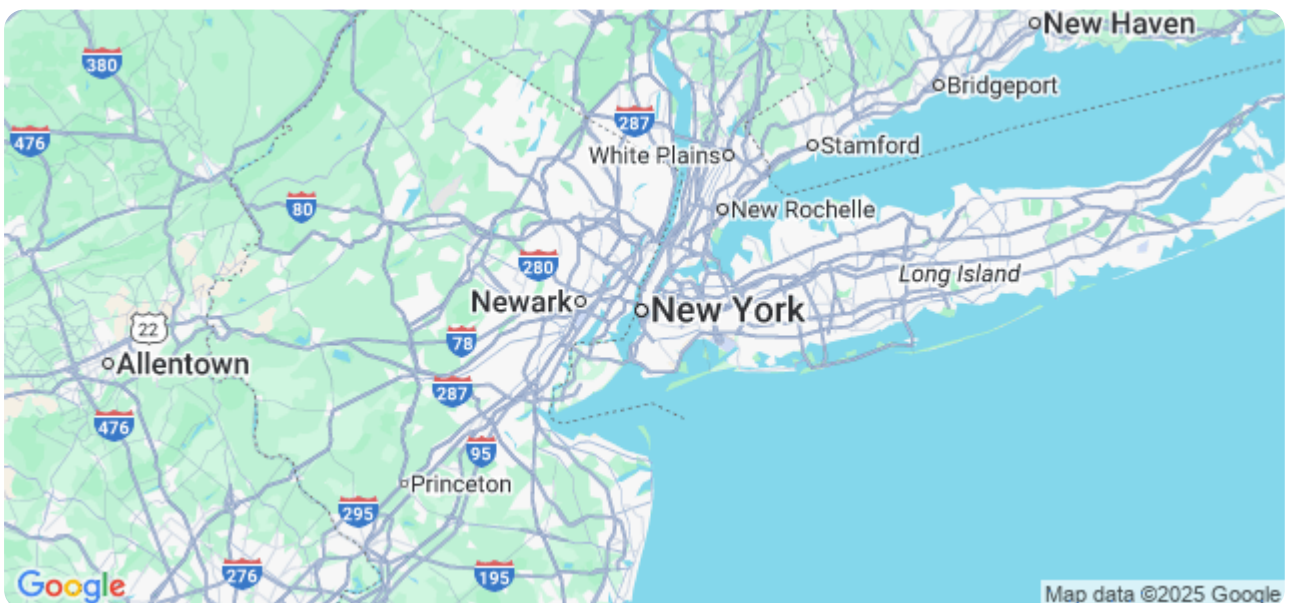
Inspector Signature

Landscaping & Grounds

Check irrigation, lawn care, and overall appearance of grounds.

Irrigation System Location

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Lawn Height (inches)

Enter a number...

Weed Presence

- ☐ None
- ☐ Minimal
- ☐ Moderate
- ☐ Significant

Last Fertilization Date

Enter date...

Areas Requiring Attention

- ☐ Front Yard
- ☐ Back Yard
- ☐ Side Yard
- ☐ Flower Beds
- ☐ Trees/Shrubs

Notes on Tree/Shrub Health

Write something...

Documentation & Follow-Up

Record findings, schedule repairs, and track completion.

Inspection Date

Enter date...

Summary of Findings

Write something...

Estimated Repair Cost

Enter a number...

Repair Priority

☐

High

☐

Medium

☐

Low

Scheduled Repair Date

Enter date...

Notes/Additional Comments

Write something...

Repair Status

- ☐ Not Started
- ☐ In Progress
- ☐ Completed

Supporting Photos/Documents

 Upload File