

INVENTORY & CONDITION REPORT

Property / Equipment Inspection

Property/Location:	<i>[Property Address or Department]</i>
Tenant / Employee:	<i>[Name of Responsible Party]</i>
Inspection Date:	<i>[Date]</i>

1. Item Checklist

Item / Room	Condition (Good/Fair/Poor)	Comments / Damage
<i>[Living Room - Sofa / Laptop - Dell XPS]</i>	<i>[Good]</i>	<i>[Minor scratches]</i>
<i>[Kitchen - Refrigerator / Monitor - LG 27"]</i>	<i>[Fair]</i>	<i>[Dented on side]</i>
<i>[Bedroom - Wardrobe / Office Chair]</i>	<i>[Good]</i>	<i>[N/A]</i>

2. Acknowledgement

By signing below, the parties agree that this report accurately reflects the condition of the items/property at the time of inspection.

Landlord / Manager

Tenant / Employee

Date:

Date:

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