



**INFORMATION CHECK-IN SHEET**

Landlord has provided this Information Check-In Sheet as required by Wis. Stat. § 704.08. Tenant has 7 days from the date Tenant commences occupancy to complete this Information Check-In Sheet and return it to Landlord.

**PREMISES:** \_\_\_\_\_

<b>LANDLORD/MANAGER:</b> _____ _____ Address: _____ _____ Telephone: _____ Date Sheet Given to Tenant: _____	<b>TENANT(S):</b> _____ _____ _____ _____
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**CONDITIONS NOTED BY LANDLORD:** Landlord provides the Premises in normal condition and good repair except for (list conditions or check box if none):  NONE

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The purpose of this form is for Tenant to advise Landlord of any other conditions noted by Tenant. If Tenant does not complete and return this Information Check-In Sheet, then Tenant will have deemed the condition of the Premises to be acceptable. Please note "None" or "N/A" as applicable.

ROOM/AREA	CONDITIONS NOTED BY TENANT
Living room	
Dining room	
Hallways	
Kitchen	
Bedroom #1: location: _____ _____	
Bedroom #2: location: _____ _____	

Bedroom #3: location: _____ _____	
Bedroom #4: location: _____ _____	
Bathroom #1: location: _____ _____	
Bathroom #2: location: _____ _____	
Exterior	
Garage/Parking Area	
Storage area	
Outside porch	
Other Comments	

This is not a request for maintenance or repairs. All maintenance requests must be made separately.

Landlord may use this Check-In Information Sheet to determine if any of Tenant's security deposit will be withheld for damages beyond normal wear and tear after Tenant vacates the Premises. Under Wis. Stat. § 704.28, Landlord may withhold amounts reasonably necessary to pay for: (a) Tenant damage, waste, or neglect of the Premises, (b) unpaid rent for which Tenant is legally responsible, (c) payment that Tenant owes under the rental agreement for utility service provided by Landlord but not included in the rent, (d) payment that Tenant owes for direct utility service provided by a government-owned utility, to the extent that Landlord becomes liable for Tenant's nonpayment, (e) unpaid monthly municipal permit fees assessed against Tenant by a local unit of government to the extent that Landlord becomes liable for Tenant's nonpayment, and (f) any other payment for a reason provided in a nonstandard rental provision.

(X) \_\_\_\_\_ (X) \_\_\_\_\_  
 Tenant's Signature ▲ Date ▲ Tenant's Signature ▲ Date ▲

(X) \_\_\_\_\_ (X) \_\_\_\_\_  
 Tenant's Signature ▲ Date ▲ Tenant's Signature ▲ Date ▲



**CHECK-OUT REPORT/SECURITY DEPOSIT WITHHOLDING**

**PREMISES:** \_\_\_\_\_

<b>LANDLORD/MANAGER:</b> _____ _____ Address: _____ _____ Telephone: _____	<b>TENANT(S):</b> _____ _____ _____
Tenancy Termination Date: _____	Date Premises Vacated: _____
Date Landlord Learned Tenant Vacated Premises (if tenant leaves after termination date or evicted): _____	Date Premises Re-rented (first day of new tenant's tenancy) (if tenant leaves before termination date): _____
Tenant Forwarding Address: _____	

ROOM/AREA	DESCRIPTION OF CONDITION at CHECK-OUT; DAMAGES/REPAIR COST COMPUTATION
Living room	
Dining room	
Hallways	
Kitchen	
Bedroom #1: location: _____ _____	
Bedroom #2: location: _____ _____	
Bedroom #3: location: _____ _____	

Bedroom #4: location: _____ _____	
Bathroom #1: location: _____ _____	
Bathroom #2: location: _____ _____	
Exterior	
Garage/Parking Area	
Storage area	
Outside porch	
Keys returned (number, date)	
Other Comments and Notes	

Check-out Inspection performed:

\_\_\_\_\_ Initials ▲ Date ▲

Security Deposit Deductions computed:

\_\_\_\_\_ Initials ▲ Date ▲

Security Deposit Balance and/or Withholding Statement Mailed/Delivered to:

\_\_\_\_\_ (name and address) on \_\_\_\_\_ (date)

Copies to: \_\_\_\_\_

<b>SECURITY DEPOSIT DEDUCTIONS</b>	
Security Deposit:	\$ _____
<b>SUBTRACT:</b>	
Total Damages/Repairs:	\$ _____
Unpaid Rent Due	\$ _____
Unpaid Utilities	\$ _____
Balance to Tenant	\$ _____

Landlord/Manager must deliver or mail Tenant's security deposit and any withholding statement within the timeframe determined per Wis. Stat. § 704.28(4).