



Contact No. 0407 418 214

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## ROUTINE INSPECTION CHECKLIST

Please complete the sections below and return prior to inspection via email or leave at the property on the day the inspection is scheduled.

Property Address:	Date:
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### CONTACT INFORMATION

Please provide contact information if your details have changed.

Phone:	Email:
Next of Kin Name & Number:	

### LEASE DETAILS

Would you like to sign a new lease agreement at the end of your current tenancy? If yes, please advise your preferred length of fixed lease.

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### PROPERTY MAINTENANCE

Are all appliances in good working order?

YES  NO


Are all items, such as doors/locks, windows, curtains/blinds, gates, cupboards/drawers etc. in good working order?

YES  NO


Are there any plumbing issues, such as leaking taps, water drainage, blockages etc?

YES  NO


Is there any other maintenance you would like to report?

YES  NO
