

# Schedule 2: Condition report



PIM  
Real Estate

**PIM Real Estate**  
200 Infinity Loop Perth WA 6000  
Phone: 1300 668 594  
Support@propertyinspectionmanager.com

## How to complete this report

- Three copies of this condition report are filled out and signed by the landlord or the landlord's agent.
- Before the tenancy begins, the landlord or the landlord's agent must inspect the residential premises and record the condition of the premises by indicating whether the particular room item is clean, undamaged and working by placing "Y" (YES) or "N" (NO) in the appropriate column (see example below). Where necessary, comments should be included in the report. The landlord or the landlord's agent must also indicate "yes" or "no" in relation to the matters set out under the headings "Health issues" and "Communications facilities".
- If the tenant has agreed to pay for water usage charges under the residential tenancy agreement, the landlord or landlord's agent must also indicate whether the residential premises have the required water efficiency measures.
- Two copies of the report which have been filled out and signed by the landlord or the landlord's agent must be given to the tenant before or when the tenant signs the agreement. The landlord or landlord's agent keeps the third copy.
- As soon as possible after the tenant signs the agreement, the tenant must inspect the residential premises and complete the tenant section of the condition report. The tenant indicates agreement or disagreement with the condition indicated by the

landlord or landlord's agent by placing "Y" (YES) or "N" (NO) in the appropriate column and by making any appropriate comments on the form. The tenant may also comment on the matters under the headings "Health issues", "Communications facilities" and "Water efficiency devices".

- The tenant must return one copy of the completed condition report to the landlord or landlord's agent within **7 days** after receiving it and is to keep the second copy.
- At, or as soon as practicable after, the termination of the tenancy agreement, both the landlord and tenant should complete the copy of the condition report that they retained, indicating the condition of the premises at the end of the tenancy. This should be done in the presence of the other party, unless the other party has been given a reasonable opportunity to be present and has not attended the inspection.

- At the end of the tenancy the premises will be inspected and the condition of the premises at that time will be compared to that stated in the original condition report.
- A condition report should be filled out whether or not a rental bond is paid.
- If you do not have enough space on the report attach a separate sheet.
- Call Fair Trading on 13 32 20 or visit the website for information about the rights and responsibilities of landlords and tenants or before completing the condition report.

## Important notes about this report

- It is a requirement that a condition report be completed by the landlord and the tenant (see above). This condition report is an important record of the condition of the residential premises when the tenancy begins and may be used as evidence of the state of repair or general condition of the premises at the commencement of the tenancy. It is important to complete the condition report accurately. It may be vital if there is a dispute, particularly about the return of the rental bond money and any damage to the premises.

## Where to go for help when you are renting

- Fair Trading looks after your bond money and manages the renting laws that cover this tenancy agreement. If you have any questions about your rights and responsibilities under this agreement, contact Fair Trading at [www.fairtrading.nsw.gov.au](http://www.fairtrading.nsw.gov.au) or call 13 32 20. Language assistance on 13 14 50 (ask for an interpreter in your language) TTY 1300 723 404.
- Your real estate agent or landlord (write contact number here):
- Tenants Advice and Advocacy Service at [www.tenants.org.au](http://www.tenants.org.au)

Sample condition report

|                                       | Condition of premises at START of tenancy |                                     |                                     |                          |                                     |                          | Landlord /Agent Comments | Tenant agrees                       |                                     | Condition of premises at END of tenancy |                          |                                     |                          |                                     |                          | Comments | Tenant agrees                       |                          |
|---------------------------------------|---|-------------------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|-------------------------------------|-------------------------------------|---|--------------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------|----------|-------------------------------------|--------------------------|
|                                       | Clean                                     |                                     | Undamaged                           |                          | Working                             |                          |                          | Y                                   | N                                   | Clean                                   |                          | Undamaged                           |                          | Working                             |                          |          | Y                                   | N                        |
|                                       | Y   | N                                   | Y                                   | N                        | Y                                   | N                        |                          | Y                                   | N                                   | Y                                       | N                        | Y                                   | N                        | Y                                   | N                        |          | Y                                   | N                        |
| <b>ENTRANCE</b>                       |   |                                     |                                     |                          |                                     |                          |                          |                                     |                                     |   |                          |                                     |                          |                                     |                          |          |                                     |                          |
| front door/screen door/ security door | <input checked="" type="checkbox"/>       | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |                          | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/>     | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| walls/picture hooks                   | <input checked="" type="checkbox"/>       | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 2 picture hooks          | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/>     | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| lights/power points/ door bell        | <input type="checkbox"/>                  | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |                          | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/>     | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| floor/coverings                       | <input checked="" type="checkbox"/>       | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | carpet stain near window | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/>     | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |          | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Lessor/agent's initial

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|  | Date : / / |
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Tenant/s initial

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# Residential Tenancy Regulation Schedule 2: Condition report

Address of rental premises: 200 Hampden Road, Nedlands 6009

Tenants Name: Mark Lester

Name of Landlord: Grace Green

Lease Commencement Date: 12 Months

|                         | Condition of premises at START of tenancy |           |         |  |               | Condition of premises at END of tenancy |       |           |         |  |               |
|-------------------------|---|-----------|---------|--|---------------|---|-------|-----------|---------|--|---------------|
|                         | Clean                                     | Undamaged | Working | Landlord / Agent Comments                  | Tenant agrees | Tenant Comments                         | Clean | Undamaged | Working | Comments                                   | Tenant agrees |
| Front Gardens           |   |           |         | gardens require weeding                    |               |   | Y     | Y         | Y       | gardens weeded                             |               |
| Driveway                |   |           |         |  |               |   |       |           |         |  |               |
| Paving                  |   |           |         | Clear of weeds                             |               |   |       |           |         | Clear of weeds                             |               |
| Garden                  | Y   | Y         | Y       | Prune roses                                |               |   | Y     | Y         | Y       | Roses pruned                               |               |
| Grass                   | Y   | Y         | Y       | Mowed                                      |               |   | Y     | Y         | Y       | Mowed                                      |               |
| Fence                   | Y   | N         | Y       | Requires painting                          |               |   | Y     | N         | Y       | Fencepainted                               |               |
| Verandah                | Y   | N         | Y       | Render crumbling                           |               |   | Y     | N         | Y       | Render fixed                               |               |
| Carport                 |   |           |         |  |               |   |       |           |         |  |               |
| Letterbox/Street Number | Y   | N         | Y       | Requires painting. See photo               |               |   | Y     | N         | Y       | Letterbox painted                          |               |
| Gutters/Downpipes       |   |           |         |  |               |   |       |           |         |  |               |
| Rear Gardens            |   |           |         | A lovely inspection, no problems to report |               |   | Y     | Y         | Y       | A lovely inspection, no problems to report |               |
| Paving                  |   |           |         | Clear of weeds                             |               |   |       |           |         | Clear of weeds                             |               |
| Garage                  |   |           |         |  |               |   |       |           |         |  |               |
| Outside                 |   |           |         |  |               |   |       |           |         |  |               |
| Floor                   |   |           |         |  |               |   |       |           |         |  |               |

Lessor/agent's initial

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# Residential Tenancy Regulation Schedule 2: Condition report

Address of rental premises: 200 Hampden Road, Nedlands 6009

Name of Landlord: Grace Green

Tenants Name: Mark Lester

Lease Commencement Date: 12 Months

|                                    | Condition of premises at START of tenancy |           |         |  |               | Condition of premises at END of tenancy |       |           |         |  |               |
|------------------------------------|---|-----------|---------|--|---------------|---|-------|-----------|---------|--|---------------|
|                                    | Clean                                     | Undamaged | Working | Landlord / Agent Comments              | Tenant agrees | Tenant Comments                         | Clean | Undamaged | Working | Comments                               | Tenant agrees |
| Walls                              |   |           |         |  |               |   |       |           |         |  |               |
| Ceiling                            |   |           |         |  |               |   |       |           |         |  |               |
| Lighting                           |   |           |         |  |               |   |       |           |         |  |               |
| Points                             |   |           |         |  |               |   |       |           |         |  |               |
| Entry/Exterior                     |   |           |         | Veranda wall needs render and painting |               |   | Y     | N         | Y       | Veranda wall needs render and painting |               |
| Door                               |   |           |         |  |               |   |       |           |         |  |               |
| Screen Door/Security Door          | Y   | Y         | Y       | Secure and working                     |               |   | Y     | Y         | Y       | Secure and working                     |               |
| Windows/Window Safety Devices      |   |           |         |  |               |   |       |           |         |  |               |
| Floor                              |   |           |         |  |               |   |       |           |         |  |               |
| Skirting                           |   |           |         |  |               |   |       |           |         |  |               |
| Walls                              |   |           |         |  |               |   |       |           |         |  |               |
| Ceiling                            |   |           |         |  |               |   |       |           |         |  |               |
| Entry Lighting                     |   |           |         | Security sensor light working          |               |   | Y     | Y         | Y       | Security sensor light working          |               |
| Points                             |   |           |         |  |               |   |       |           |         |  |               |
| Corded Blinds and Window Coverings |   |           |         |  |               |   |       |           |         |  |               |
| Bricks                             |   |           |         |  |               |   |       |           |         |  |               |

Lessor/agent's initial

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Address of rental premises: 200 Hampden Road, Nedlands 6009

Name of Landlord: Grace Green

Tenants Name: Mark Lester

Lease Commencement Date: 12 Months

|                               | Condition of premises at START of tenancy |           |         |                                 |               | Condition of premises at END of tenancy |       |           |         |                       |               |
|-------------------------------|---|-----------|---------|---------------------------------|---------------|---|-------|-----------|---------|-----------------------|---------------|
|                               | Clean                                     | Undamaged | Working | Landlord / Agent Comments       | Tenant agrees | Tenant Comments                         | Clean | Undamaged | Working | Comments              | Tenant agrees |
| Kitchen/Meals                 |   |           |         | Pantry sensor light not working |               |   | Y     | Y         | N       | Pantry sensor fixed   |               |
| Floor                         |   |           |         |                                 |               |   |       |           |         |                       |               |
| Skirting                      |   |           |         |                                 |               |   |       |           |         |                       |               |
| Walls                         |   |           |         |                                 |               |   |       |           |         |                       |               |
| Ceiling                       |   |           |         |                                 |               |   |       |           |         |                       |               |
| Lighting                      |   |           |         | Pantry sensor not working       |               |   | Y     | Y         | Y       | Pantry sensor working |               |
| Points                        | Y   | Y         | Y       |                                 |               |   | Y     | Y         | Y       |                       |               |
| Windows/Window Safety Devices |   |           |         |                                 |               |   |       |           |         |                       |               |
| Bench                         | Y   | Y         | Y       | No noted markings               |               |   | Y     | Y         | Y       | No noted markings     |               |
| Cupboard                      | Y   | Y         | N       | Hing problems                   |               |   | Y     | Y         | Y       | Hing fixed            |               |
| Drawer                        |   |           |         |                                 |               |   |       |           |         |                       |               |
| Sink                          |   |           |         |                                 |               |   |       |           |         |                       |               |
| Oven                          |   |           |         |                                 |               |   |       |           |         |                       |               |
| StoveTop                      |   |           |         |                                 |               |   |       |           |         |                       |               |
| RHood                         |   |           |         |                                 |               |   |       |           |         |                       |               |
| Pantry                        |   |           |         |                                 |               |   |       |           |         |                       |               |

Lessor/agent's initial

Date : / /

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# Residential Tenancy Regulation Schedule 2: Condition report

Address of rental premises: 200 Hampden Road, Nedlands 6009

Name of Landlord: Grace Green

Tenants Name: Mark Lester

Lease Commencement Date: 12 Months

|                                    | Condition of premises at START of tenancy |           |         |                               |               | Condition of premises at END of tenancy |       |           |         |                              |               |
|------------------------------------|---|-----------|---------|-------------------------------|---------------|---|-------|-----------|---------|------------------------------|---------------|
|                                    | Clean                                     | Undamaged | Working | Landlord / Agent Comments     | Tenant agrees | Tenant Comments                         | Clean | Undamaged | Working | Comments                     | Tenant agrees |
| D/washer                           |   |           |         |                               |               |   |       |           |         |                              |               |
| Corded Blinds and Window Coverings |   |           |         |                               |               |   |       |           |         |                              |               |
| Theatre                            |   |           |         | Carpet has texta stain        |               |   | N     | Y         | Y       | Stain removed                |               |
| Power Sockets                      | Y   | Y         | Y       | Smart wired with cable        |               |   | Y     | Y         | Y       | Smart wired with cable       |               |
| Walls                              | Y   | Y         | Y       | Freshly painted               |               |   | Y     | Y         | Y       | Freshly painted              |               |
| Lights                             | Y   | Y         | N       | 2 down lights need new globes |               |   | Y     | Y         | Y       | 2 down light globes replaced |               |
| Carpets                            | N   | Y         | Y       | Require a clean               |               |   | Y     | Y         | Y       | Cleaned                      |               |
| Lounge                             |   |           |         | Carpet require cleaning       |               |   | N     | Y         | Y       | Carpet cleaned               |               |
| Door                               |   |           |         |                               |               |   |       |           |         |                              |               |
| Floor                              | N   | Y         | Y       | Carpet requires cleaning      |               |   | Y     | Y         | Y       | Carpet cleaned               |               |
| Skirting                           |   |           |         |                               |               |   |       |           |         |                              |               |
| Walls                              | Y   | Y         | Y       | Freshly painted               |               |   | Y     | Y         | Y       | Freshly painted              |               |
| Blinds                             | N   | Y         | Y       | Require cleaning              |               |   | Y     | Y         | Y       | Cleaned                      |               |
| Ceiling                            | Y   | Y         | Y       | Freshly painted               |               |   | Y     | Y         | Y       | Freshly painted              |               |

Lessor/agent's initial

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Tenant/s initial

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| 1. | 2. | 3. | Date : / / |
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# Residential Tenancy Regulation Schedule 2: Condition report

Address of rental premises: 200 Hampden Road, Nedlands 6009

Name of Landlord: Grace Green

Tenants Name: Mark Lester

Lease Commencement Date: 12 Months

|                                    | Condition of premises at START of tenancy |           |         |   |               | Condition of premises at END of tenancy |       |           |         |   |               |
|------------------------------------|---|-----------|---------|---|---------------|---|-------|-----------|---------|---|---------------|
|                                    | Clean                                     | Undamaged | Working | Landlord / Agent Comments                     | Tenant agrees | Tenant Comments                         | Clean | Undamaged | Working | Comments                                      | Tenant agrees |
| Lighting                           | Y   | Y         | Y       | All lights working                            |               |   | Y     | Y         | Y       | All lights working                            |               |
| Points                             |   |           |         |   |               |   |       |           |         |   |               |
| Corded Blinds and Window Coverings |   |           |         |   |               |   |       |           |         |   |               |
| Windows/Window Safety Devices      |   |           |         |   |               |   |       |           |         |   |               |
| Ceiling Fan/Air Conditioner        | Y   | Y         | N       | Requires servicing                            |               |   | Y     | Y         | N       | Requires servicing                            |               |
| Bathroom 1                         |   |           |         | floor tiles/tiling cracked                    |               |   | Y     | N         | Y       | floor tiles/tiling cracked                    |               |
| Door                               | Y   | Y         | Y       |   |               |   | Y     | Y         | Y       |   |               |
| Floor                              | Y   | Y         | Y       | All tiles wiped clean, area neatly presented. |               |   | Y     | Y         | Y       | All tiles wiped clean, area neatly presented. |               |
| Walls                              |   |           |         |   |               |   |       |           |         |   |               |
| Ceiling                            |   |           |         |   |               |   |       |           |         |   |               |
| Lighting                           |   |           |         |   |               |   |       |           |         |   |               |
| Points                             |   |           |         |   |               |   |       |           |         |   |               |
| Windows/Window Safety Devices      |   |           |         |   |               |   |       |           |         |   |               |
| Sink/Taps                          | Y   | Y         | N       | tap(s) leaking                                |               |   | Y     | Y         | Y       | tap(s) fixed                                  |               |
| Toilet                             |   |           |         |   |               |   |       |           |         |   |               |
| Shower/Bath/Taps                   |   |           |         | Wet areas are clean and tidy.                 |               |   |       |           |         | Wet areas are clean and tidy.                 |               |

Lessor/agent's initial

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|  | Date : / / |
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Tenant/s initial

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| 1. | 2. | 3. | Date : / / |
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# Residential Tenancy Regulation Schedule 2: Condition report

Address of rental premises: 200 Hampden Road, Nedlands 6009

Name of Landlord: Grace Green

Tenants Name: Mark Lester

Lease Commencement Date: 12 Months

|                                    | Condition of premises at START of tenancy |           |            |                           |               | Condition of premises at END of tenancy |       |            |         |                          |               |
|------------------------------------|---|-----------|------------|---------------------------|---------------|---|-------|------------|---------|--------------------------|---------------|
|                                    | Clean                                     | Undamaged | Working    | Landlord / Agent Comments | Tenant agrees | Tenant Comments                         | Clean | Undamaged  | Working | Comments                 | Tenant agrees |
|                                    | Y   | Y         | Y          |                           |               |   | Y     | Y          | Y       |                          |               |
| Mirror/Cabinet/Vanity              |   |           |            |                           |               |   |       |            |         |                          |               |
| Towel Rails                        | Y   | Y         | N          | Requires new rail         |               |   | Y     | Y          | Y       | Towel rail replaced      |               |
| Toilet Roll Holder                 |   |           |            |                           |               |   |       |            |         |                          |               |
| Heating/Exhaust Fan/Vent           | Y   | Y         | N          | Heat globe not working    |               |   | Y     | Y          | Y       | New heat globe installed |               |
| Corded Blinds and Window Coverings |   |           |            |                           |               |   |       |            |         |                          |               |
| <b>Bathroom 2</b>                  |   |           |            |                           |               |   |       |            |         |                          |               |
| Door                               |   |           |            |                           |               |   |       |            |         |                          |               |
| Floor                              |   |           |            |                           |               |   |       |            |         |                          |               |
| Walls                              |   |           |            |                           |               |   |       |            |         |                          |               |
| Ceiling                            |   |           |            |                           |               |   |       |            |         |                          |               |
| Lighting                           |   |           |            |                           |               |   |       |            |         |                          |               |
| Points                             |   |           |            |                           |               |   |       |            |         |                          |               |
| Windows/Window Safety Devices      |   |           |            |                           |               |   |       |            |         |                          |               |
| Sink/Taps                          |   |           |            |                           |               |   |       |            |         |                          |               |
| Toilet                             |   |           |            |                           |               |   |       |            |         |                          |               |
| Shower/Bath/Taps                   |   |           |            |                           |               |   |       |            |         |                          |               |
| Lessor/agent's initial             |   |           | Date : / / | Tenant/s initial          | 1.            | 2.                                      | 3.    | Date : / / |         | Page 7 of 16             |               |

# Residential Tenancy Regulation Schedule 2: Condition report

Address of rental premises: 200 Hampden Road, Nedlands 6009

Name of Landlord: Grace Green

Tenants Name: Mark Lester

Lease Commencement Date: 12 Months

| Condition of premises at START of tenancy |          |           |          |                           |               | Condition of premises at END of tenancy |          |           |          |                       |               |
|---|----------|-----------|----------|---------------------------|---------------|---|----------|-----------|----------|-----------------------|---------------|
|   | Clean    | Undamaged | Working  | Landlord / Agent Comments | Tenant agrees | Tenant Comments                         | Clean    | Undamaged | Working  | Comments              | Tenant agrees |
| Mirror/Cabinet/Vanity                     |          |           |          |                           |               |   |          |           |          |                       |               |
| Towel Rails                               |          |           |          |                           |               |   |          |           |          |                       |               |
| Toilet Roll Holder                        |          |           |          |                           |               |   |          |           |          |                       |               |
| Heating/Exhaust Fan/Vent                  |          |           |          |                           |               |   |          |           |          |                       |               |
| Corded Blinds and Window Coverings        |          |           |          |                           |               |   |          |           |          |                       |               |
| <b>Bedroom 1</b>                          |          |           |          |                           |               |   | <b>Y</b> | <b>Y</b>  | <b>Y</b> |                       |               |
| Door                                      | <b>Y</b> | <b>Y</b>  | <b>N</b> | Scrapes when closing      |               |   | <b>Y</b> | <b>Y</b>  | <b>N</b> | Scrapes when closing  |               |
| Floor                                     |          |           |          | carpet neat and clean     |               |   | <b>Y</b> | <b>Y</b>  | <b>Y</b> | carpet neat and clean |               |
| Skirting                                  |          |           |          |                           |               |   |          |           |          |                       |               |
| Walls                                     |          |           |          |                           |               |   |          |           |          |                       |               |
| Ceiling                                   |          |           |          |                           |               |   |          |           |          |                       |               |
| Lighting                                  |          |           |          |                           |               |   |          |           |          |                       |               |
| Points                                    |          |           |          |                           |               |   |          |           |          |                       |               |
| Corded Blinds and Window Coverings        | <b>N</b> | <b>Y</b>  | <b>Y</b> | Requires cleaning         |               |   | <b>Y</b> | <b>Y</b>  | <b>Y</b> | Blinds cleaned        |               |
| Wardrobe/Drawers/She lves                 |          |           |          |                           |               |   |          |           |          |                       |               |

Lessor/agent's initial

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Tenant/s initial

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| 1. | 2. | 3. | Date : / / |
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# Residential Tenancy Regulation Schedule 2: Condition report

Address of rental premises: 200 Hampden Road, Nedlands 6009

Name of Landlord: Grace Green

Tenants Name: Mark Lester

Lease Commencement Date: 12 Months

| Condition of premises at START of tenancy |       |           |         |                           |               | Condition of premises at END of tenancy |       |           |         |          |               |
|---|-------|-----------|---------|---------------------------|---------------|---|-------|-----------|---------|----------|---------------|
|   | Clean | Undamaged | Working | Landlord / Agent Comments | Tenant agrees | Tenant Comments                         | Clean | Undamaged | Working | Comments | Tenant agrees |
|   |       |           |         |                           |               |   |       |           |         |          |               |
| Ceiling Fan/Air Conditioner               |       |           |         |                           |               |   |       |           |         |          |               |
| <b>Bedroom 2</b>                          |       |           |         |                           |               |   |       |           |         |          |               |
| Door                                      |       |           |         |                           |               |   |       |           |         |          |               |
| Floor                                     |       |           |         |                           |               |   |       |           |         |          |               |
| Skirting                                  |       |           |         |                           |               |   |       |           |         |          |               |
| Walls                                     |       |           |         |                           |               |   |       |           |         |          |               |
| Ceiling                                   |       |           |         |                           |               |   |       |           |         |          |               |
| Lighting                                  |       |           |         |                           |               |   |       |           |         |          |               |
| Points                                    |       |           |         |                           |               |   |       |           |         |          |               |
| Corded Blinds and Window Coverings        |       |           |         |                           |               |   |       |           |         |          |               |
| Wardrobe/Drawers/Shelves                  |       |           |         |                           |               |   |       |           |         |          |               |
| Windows/Window Safety Devices             |       |           |         |                           |               |   |       |           |         |          |               |
| Ceiling Fan/Air Conditioner               |       |           |         |                           |               |   |       |           |         |          |               |
| <b>Bedroom 3</b>                          |       |           |         |                           |               |   |       |           |         |          |               |
| Door                                      |       |           |         |                           |               |   |       |           |         |          |               |
| Floor                                     |       |           |         |                           |               |   |       |           |         |          |               |

Lessor/agent's initial

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|  | Date : / / |
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Tenant/s initial

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| 1. | 2. | 3. | Date : / / |
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# Residential Tenancy Regulation Schedule 2: Condition report

Address of rental premises: 200 Hampden Road, Nedlands 6009

Name of Landlord: Grace Green

Tenants Name: Mark Lester

Lease Commencement Date: 12 Months

| Condition of premises at START of tenancy |       |           |         |                           |               | Condition of premises at END of tenancy |       |           |         |          |               |
|---|-------|-----------|---------|---------------------------|---------------|---|-------|-----------|---------|----------|---------------|
|   | Clean | Undamaged | Working | Landlord / Agent Comments | Tenant agrees | Tenant Comments                         | Clean | Undamaged | Working | Comments | Tenant agrees |
|   |       |           |         |                           |               |   |       |           |         |          |               |
| Walls                                     |       |           |         |                           |               |   |       |           |         |          |               |
| Ceiling                                   |       |           |         |                           |               |   |       |           |         |          |               |
| Lighting                                  |       |           |         |                           |               |   |       |           |         |          |               |
| Points                                    |       |           |         |                           |               |   |       |           |         |          |               |
| Corded Blinds and Window Coverings        |       |           |         |                           |               |   |       |           |         |          |               |
| Wardrobe/Drawers/Shelves                  |       |           |         |                           |               |   |       |           |         |          |               |
| Windows/Window Safety Devices             |       |           |         |                           |               |   |       |           |         |          |               |
| Ceiling Fan/Air Conditioner               |       |           |         |                           |               |   |       |           |         |          |               |
| <b>Dining</b>                             |       |           |         |                           |               |   |       |           |         |          |               |
| Door                                      |       |           |         |                           |               |   |       |           |         |          |               |
| Floor                                     |       |           |         |                           |               |   |       |           |         |          |               |
| Skirting                                  |       |           |         |                           |               |   |       |           |         |          |               |
| Walls                                     |       |           |         |                           |               |   |       |           |         |          |               |
| Ceiling                                   |       |           |         |                           |               |   |       |           |         |          |               |
| Lighting                                  |       |           |         |                           |               |   |       |           |         |          |               |
| Points                                    |       |           |         |                           |               |   |       |           |         |          |               |

|                        |  |            |                  |    |    |    |            |               |
|------------------------|--|------------|------------------|----|----|----|------------|---------------|
| Lessor/agent's initial |  | Date : / / | Tenant/s initial | 1. | 2. | 3. | Date : / / | Page 10 of 16 |
|------------------------|--|------------|------------------|----|----|----|------------|---------------|

# Residential Tenancy Regulation Schedule 2: Condition report

Address of rental premises: 200 Hampden Road, Nedlands 6009

Name of Landlord: Grace Green

Tenants Name: Mark Lester

Lease Commencement Date: 12 Months

|                                    | Condition of premises at START of tenancy |           |         |                           |               | Condition of premises at END of tenancy |       |           |         |          |               |
|------------------------------------|---|-----------|---------|---------------------------|---------------|---|-------|-----------|---------|----------|---------------|
|                                    | Clean                                     | Undamaged | Working | Landlord / Agent Comments | Tenant agrees | Tenant Comments                         | Clean | Undamaged | Working | Comments | Tenant agrees |
| Windows/Window Safety Devices      |   |           |         |                           |               |   |       |           |         |          |               |
| Corded Blinds and Window Coverings |   |           |         |                           |               |   |       |           |         |          |               |
| Ceiling Fan/Air Conditioner        |   |           |         |                           |               |   |       |           |         |          |               |
| <b>Toilet</b>                      |   |           |         |                           |               |   |       |           |         |          |               |
| Door                               |   |           |         |                           |               |   |       |           |         |          |               |
| Floor                              |   |           |         |                           |               |   |       |           |         |          |               |
| Walls                              |   |           |         |                           |               |   |       |           |         |          |               |
| Toilet                             |   |           |         |                           |               |   |       |           |         |          |               |
| Roll Holder                        |   |           |         |                           |               |   |       |           |         |          |               |
| Ceiling                            |   |           |         |                           |               |   |       |           |         |          |               |
| Lighting                           |   |           |         |                           |               |   |       |           |         |          |               |
| Windows/Window Safety Devices      |   |           |         |                           |               |   |       |           |         |          |               |
| Sink                               |   |           |         |                           |               |   |       |           |         |          |               |
| Corded Blinds and Window Coverings |   |           |         |                           |               |   |       |           |         |          |               |
| <b>Laundry</b>                     |   |           |         |                           |               |   |       |           |         |          |               |
| Door                               |   |           |         |                           |               |   |       |           |         |          |               |

Lessor/agent's initial

Date : / /

Tenant/s initial

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Date : / /

# Residential Tenancy Regulation Schedule 2: Condition report

Address of rental premises: 200 Hampden Road, Nedlands 6009

Name of Landlord: Grace Green

Tenants Name: Mark Lester

Lease Commencement Date: 12 Months

| Condition of premises at START of tenancy |       |           |         |                            |               | Condition of premises at END of tenancy |       |           |         |                            |               |
|---|-------|-----------|---------|----------------------------|---------------|---|-------|-----------|---------|----------------------------|---------------|
|   | Clean | Undamaged | Working | Landlord / Agent Comments  | Tenant agrees | Tenant Comments                         | Clean | Undamaged | Working | Comments                   | Tenant agrees |
| Floor                                     |       |           |         |                            |               |   |       |           |         |                            |               |
| Skirting                                  |       |           |         |                            |               |   |       |           |         |                            |               |
| Walls                                     |       |           |         |                            |               |   |       |           |         |                            |               |
| Untitled                                  |       |           |         |                            |               |   |       |           |         |                            |               |
| Ceiling                                   |       |           |         |                            |               |   |       |           |         |                            |               |
| Lighting                                  |       |           |         |                            |               |   |       |           |         |                            |               |
| Points                                    |       |           |         |                            |               |   |       |           |         |                            |               |
| Cupboard                                  |       |           |         |                            |               |   |       |           |         |                            |               |
| Bench                                     |       |           |         |                            |               |   |       |           |         |                            |               |
| Trough                                    |       |           |         |                            |               |   |       |           |         |                            |               |
| Washing Machine Taps                      |       |           |         |                            |               |   |       |           |         |                            |               |
| Exhaust Fan/Vent                          |       |           |         |                            |               |   |       |           |         |                            |               |
| Toilet                                    |       |           |         |                            |               |   |       |           |         |                            |               |
| Outside Door                              |       |           |         |                            |               |   |       |           |         |                            |               |
| Corded Blinds and Window Coverings        |       |           |         |                            |               |   |       |           |         |                            |               |
| Windows/Window Safety Devices             |       |           |         |                            |               |   |       |           |         |                            |               |
| Security/Safety                           |       |           |         | Security doors all working |               |   |       |           |         | Security doors all working |               |

Lessor/agent's initial

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Tenant/s initial

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| 1. | 2. | 3. | Date : / / |
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# Residential Tenancy Regulation Schedule 2: Condition report

Address of rental premises: 200 Hampden Road, Nedlands 6009

Name of Landlord: Grace Green

Tenants Name: Mark Lester

Lease Commencement Date: 12 Months

| Condition of premises at START of tenancy |           |         |                            |               | Condition of premises at END of tenancy |       |           |         |   |               |
|---|-----------|---------|----------------------------|---------------|---|-------|-----------|---------|---|---------------|
| Clean                                     | Undamaged | Working | Landlord / Agent Comments  | Tenant agrees | Tenant Comments                         | Clean | Undamaged | Working | Comments  | Tenant agrees |
|   |           |         | House alarm working        |               |   |       |           |         | House alarm working   |               |
|   |           |         | Smoke Alarms               |               |   |       |           |         |   |               |
|   |           |         | RCD/Safety Switch          |               |   |       |           |         |   |               |
|   |           |         | Keys/Other Opening Devices |               |   |       |           |         |   |               |
|   |           |         | Entry Lighting             |               |   |       |           |         |   |               |
|   |           |         | External Door Locks        |               |   |       |           |         |   |               |
|   |           |         | Maintenance Required       |               |   |       |           |         | 1. Render on front veranda required<br>2. Paint front fence/letterbox<br>3. Replace heat globe in bathroom<br>4. Sensor in pantry not working   |               |
|   |           |         | Suggested Improvements     |               |   |       |           |         | At this stage we suggest the repairs to the exterior veranda are carried out within 3 months. Overall the property in in good condition for its age.  |               |
|   |           |         | Our Summary                |               |   |       |           |         | Overall we are very happy with the way the tenant is maintaining the property and especially the lounge reprint as discussed.<br>We have made a couple of requests to the weeds in the front garden as detailed in the report but nothing of concern.<br>We do recommend the maintenance items as highlight should be carried out with the render on the veranda the most urgent. |               |

Lessor/agent's initial

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|  | Date : / / |
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Tenant/s initial

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Date : / /

# Residential Tenancy Regulation Schedule 2: Condition report

Address of rental premises: 200 Hampden Road, Nedlands 6009

Name of Landlord: Grace Green

Tenants Name: Mark Lester

Lease Commencement Date: 12 Months

| Condition of premises at START of tenancy |       |           |         |                           |               | Condition of premises at END of tenancy |           |         |   |               |
|---|-------|-----------|---------|---------------------------|---------------|---|-----------|---------|---|---------------|
|   | Clean | Undamaged | Working | Landlord / Agent Comments | Tenant agrees | Clean                                   | Undamaged | Working | Comments  | Tenant agrees |
|   |       |           |         |                           |               |   |           |         |   |               |
|   |       |           |         |                           |               |   |           |         | out with the render on the veranda the most urgent. |               |

Lessor/agent's initial

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|  | Date : / / |
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Tenant/s initial

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| 1. | 2. | 3. | Date : / / |
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# Residential Tenancy Regulation Schedule 2: Condition report

**Address of rental premises:** 200 Hampden Road, Nedlands 6009

**Tenants Name:** Mark Lester

**Name of Landlord:** Grace Green

**Lease Commencement Date:** 12 Months

## Health issues

The landlord must indicate whether the following apply to the premises:

|  |                          |     |                          |    |
|--|--------------------------|-----|--------------------------|----|
| Are there any signs of mould and dampness? | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| Are there any pests and vermin?            | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| Has any rubbish been left on the premises? | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |

## Communication facilities

The landlord must indicate whether the following facilities are available:

|   |                          |     |                          |    |
|---|--------------------------|-----|--------------------------|----|
| a telephone line is connected to the residential premises | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| an internet line is connected to the residential premises | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |

## Water efficiency devices

*[only applicable if tenant pays water usage charges for the residential premises]*

The landlord must indicate whether the following efficiency measures are in place in the premises:

|   |                          |     |                          |    |
|---|--------------------------|-----|--------------------------|----|
| all showerheads have a maximum flow rate of 9 litres per minute   | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| all internal cold water taps and single mixer taps in kitchen or bathroom hand basins have a maximum flow rate of 9 litres per minute | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| no leaking taps on residential premises   | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |

**Water meter reading:** 120000

**Furniture:** (See attached list)

Landlord/agent's signature:

Date:

Tenant's signature

Date:

**Additional comments on health issues, communication facilities, water efficiency devices** [may be added by landlord or tenant, or both]

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**Approximate dates when work last done on residential premises**

Installation of water efficiency measures:

Painting of premises (external):

Painting of premises (internal):

Flooring laid/replaced/cleaned:

**Landlord's promise to undertake work:** [Delete if not required]

The landlord agrees to undertake the following cleaning, repairs, additions or other work during the tenancy: \_\_\_\_\_

The landlord agrees to complete that work by: \_\_\_\_\_

Landlord/agent's signature: \_\_\_\_\_

Date: \_\_\_\_\_

Lessor/agent's initial

|  |            |
|--|------------|
|  | Date : / / |
|--|------------|

Tenant/s initial

|    |    |    |            |
|----|----|----|------------|
| 1. | 2. | 3. | Date : / / |
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# Residential Tenancy Regulation Schedule 2: Condition report

**Address of rental premises:** 200 Hampden Road, Nedlands 6009

**Tenants Name:** Mark Lester

**Name of Landlord:** Grace Green

**Lease Commencement Date:** 12 Months

Lessor/agent's initial

|  |            |
|--|------------|
|  | Date : / / |
|--|------------|

Tenant/s initial

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