Exit condition report – general tenancies (Form 14a)

Residential Tenancies and Rooming Accommodation Act 2008 (Section 66)



Address of the rental premises			The Entry (and Exit) reports provide evidence of the condition of the premises at the beginning and ending of the tenancy. Take time to fill these forms in carefully. These					
		Postcode	documents may be referred to as evidence if there is a dispute over the bond refund at the end of the tenancy.					
Details of the tenant/s			Tenant					
1. Full name/s			1. Inspect the premises.					
Forwarding address			2. Mark each item on the list clean, working, undamaged (where applicable).					
	1	Postcode	3. Make a note of any extra items in the additional comments/information section.					
Phone	Mobile		 Initial each page of the report. Give it to the lessor/agent as soon as possible once the agreement ends. 					
Email			5. Talk to the lessor/agent if you disagree about the condition of the premises. Comments					
2. Full name/s			can be recorded in the additional comments/information section (Page 7) or by attaching a separate page.					
Forwarding address			Supporting documentation has been attached Yes No					
		Postcode	6. Retain the signed copy of the report from the lessor/agent.					
Phone	Mobile		Lessor/agent					
Email			Inspect the premises.					
3. Full name/s			Include comments where you disagree with the tenant's report.					
Forwarding address			3. Initial each page of the report.					
1 of warding address	1	Postcode	 Talk to the tenant if you disagree about the condition of the premises. Any agreement can be recorded in the additional comments/information section. 					
Phone	Mobile		5. Return a signed copy of the report to the tenant within 3 business days. Retain a copy					
Email			for at least one year after the tenancy agreement ends.					
Name/trading name of the lessor/agent			Note: The Entry condition report (Form 1a) is compared to this Exit condition report (Form 14a) at the end of the tenancy.					
Darley Properties Pty Ltd T/as LJ Hooker	Caboolture/Morayfie	ld						
Water meter reading at end of tenancy:			Do not send to the RTA—give this form to the lessor/agent, keep a copy for your records.					
Date / / Meter Location:								
Tenant/s initials 1.	2.	3.	Lessor/agent initials					



Tenant/s Comments (if any)

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Entry					
Doors/walls/ceiling					
Windows/screens					
Blinds/curtains					
Fans/light fittings					
Floor/floor coverings					
Power points					
Lounge room					
Doors/walls/ceiling					
Windows/screens					
Blinds/curtains					
Fans/light fittings					
Floor/floor coverings					
TV/power points					
Air conditioner					
Family room					
Doors/walls/ceiling					
Windows/screens					
Blinds/curtains					
Fans/light fittings					
Floor/floor coverings					
TV/power points					
Air conditioner					
Tenant/s initials	1.		2. 3.	Lessor/agent initials	

4	
Total	residential
rta	tenancies
	authority

Insert $\mathbf{Y}/\sqrt{\ }= \mathrm{Yes}$ Insert $\mathbf{N}/\mathbf{X} = \mathrm{No}$	lean	Norking	ndamaged	
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Tenant/s Comments (if any)

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Kitchen/meals				
Doors/walls/ceiling				
Windows/screens				
Blinds/curtains				
Fans/light fittings				
Floor/floor coverings				
Cupboards/drawers				
Bench tops/tiling				
Sink/disposal unit/ taps Stove top				
Oven/griller				
Exhaust fan/ rangehood				
Dishwasher				
Power points				
Dining room				
Doors/walls/ceiling				
Windows/screens				
Blinds/curtains				
Fans/light fittings				
Floor/floor coverings				
TV/power points				
Air conditioner				
			•	
Tenant/s initials	1		2 3	Lessor/agent initials

4	
Total	residential
rta	tenancies
	authority

Insert $\mathbf{Y}/\mathbf{J} = \text{Yes}$ Insert $\mathbf{N}/\mathbf{J} = \text{No}$	lean	Vorking	ndamaged	
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Tenant/s Comments (if any)

Bedroom 1				
Doors/walls/ceiling				
Windows/screens				
Blinds/curtains				
Fans/light fittings				
Floor/floor coverings				
Wardrobe/drawers/ shelves				
Power points				
Air conditioner				
Ensuite				
Doors/walls/ceiling				
Windows/screens				
Blinds/curtains				
Fans/light fittings				
Floor/floor coverings				
Bath/shower/ shower screen				
Wash basin/vanity				
Mirror/cabinet				
Towel rails				
Toilet				
Power points				
Exhaust fan				
			·	
Tenant/s initials	1.		2. 3.	Lessor/agent initials



Insert \mathbf{Y}/\checkmark = Yes Insert \mathbf{N}/\checkmark = No	an	/orking	damaged	
	Slear	Nork	Jude	

Tenant/s Comments (if any)

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Bedroom 2							
Doors/walls/ceiling							
Windows/screens							
Blinds/curtains							
Fans/light fittings							
Floor/floor coverings							
Wardrobe/drawers/ shelves							
Power points							
Air conditioner							
Bedroom 3							
Doors/walls/ceiling							
Windows/screens							
Blinds/curtains							
Fans/light fittings							
Floor/floor coverings							
Wardrobe/drawers/ shelves							
Power points							
Air conditioner							
Bedroom 4							
Doors/walls/ceiling							
Windows/screens							
Blinds/curtains							
Fans/light fittings							
Floor/floor coverings							
Wardrobe/drawers/ shelves							
Power points							
Air conditioner							
					_	<u> </u>	
Tenant/s initials	1.			2.	3.	Lessor/agent initials	

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Insert Y /√= Yes	
Insert $N/X = No$	
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Tenant/s Comments (if any)

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Bathroom							
Doors/walls/ceiling							
Windows/screens							
Blinds/curtains							
Fans/light fittings							
Floor/floor coverings							
Bath							
Shower/ shower screen							
Wash basin/vanity							
Mirror/cabinet							
Towel rails							
Power points							
Exhaust fan							
Toilet							
Toilet	_	<u> </u>					
Doors/walls/ceiling							
Cistern							
Light fittings							
Exhaust fan							
Laundry							
Doors/walls/ceiling							
Windows/screens							
Blinds/curtains							
Fans/light fittings							
Floor/floor coverings							
Wash tubs							
Washing machine/ dryer			\dashv				
Power points							
Tenant/s initials	1.	<u> </u>		2.	3.	Lessor/agent initials	

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Insert Y /√= Yes	
Insert N / X = No	ean

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Tenant/s Comments (if any)

Lessor/agent Comment on tenant/s report

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General				
Smoke alarms*				
Security devices				
Electrical safety switches				
Hot water system				
Keys/locks/remotes				
Staircases/railings				
Wheelie & recycle bins				
Pool/equipment				
Street number/ letter box				
External walls				
Balcony/porch/deck				
Awning/gutters				
Paving/pergola				
Garage/car port/ storeroom				
Garden shed				
Gates/fences				
Grounds/garden				
External taps/hose				
Clothes line				
Solar panels				
Paths/driveway				
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*Smoke Alarms - In relation to smoke alarms, where the boxes 'working' &/or 'undamaged' have been ticked, it confirms only that at the time of testing, each smoke alarm's battery & alarm sounder were working.

Additional comments/info	rmation	Lessor/agent	Lessor/agent			
				Signature	Date	
					1 1	
Gas bottle level	Water tank level	Pool safety certificate location	Pool safety certificate location Print name			
Tenant 1		Tenant 2	Tenant 2		Tenant 3	
Signature	Date	Signature	Date	Signature	Date	
	1 1		1 1		1 1	
Print name		Print name	Print name		Print name	