ASSIGNMENT/TERMINATION INSPECTION CHECKLIST

SOLDIERS NAME & RANK:

UNIT:

ASSIGNMENT OR TERMINATION (CIRCE ONE) BLDG: ROOM#

	ITEM INSPECTED					
	[]	New	Good	Fair	Poor	DEFICIENCES
K I T C H E N	MAIN DOOR/LOCK OPERATION	0	.0	0	0	
	CEILING AND WALLS	Ο	0	0	0	
	FLOOR	Ο	0	0	0	
	LIGHT FI XTURES/SWITCHES/OUTLETS	0	0	0	Ο	
	SINK/GARBAGE DISPOSAL	0	0	0	0	
	CABINETS AND COUNTERTOP	0	0	0	Ο	
	STOVE	0	0	0	0	
	TABLE W/2CHAIRS	0	0	0	0	
	MICROWAVE	0	0	0	0	
	REFRIGERATOR	0	0	0	Ο	
B A T H	CEILING AND WALLS	0	0	0	0	
	DOOR AND FLOOR	0	0	0	0	
	SHOWER/TUB	0	0	Ο	0	
	SINK AND COMMODE	0	0	0	0	
	VANITY/CABINET/MIRRORS	0	0	Ο	0	
	LIGHT FIXTURES/SWITCHES/OUTLETS	0	0	0	0	
B E D R O O M	CEILING AND WALLS	0	0	0	0	
	DOORS AND FLOOR	0	0	Ο	0	
	WINDOW/SCREENS/CURTAINS/BLINDS	0	0	0	0	
	CLOSET	0	0	Ο	0	
	LIGHT FIXTURES/SWITCHES/OUTLETS	0	0	0	0	
	BED/UNDERBED DRAWERS	0	0	0	0	
	MATIRESS	0	0	0	0	
	CHEST 3 DRAWER/DRESSER/MIRROR	0	0	0	0	
	DESK/COMPUTER/WITH CHAIR	0	0	0	0	
	DESK/ DROPLID	0	0	0	0	
	NIGHT STAND/END TABLE	0	0	0	0	1
	TV STAND/ARMOIRE	0	0	0	0	
		0	0	0	0	
	SOFA/LOUNGE CHAIR DINING ROOMTABLE W/2 CHAIRS	0	0	0	0	
	LAMP/TRASHCAN	0	0	0	0	
	SMOKE DETECTOR	0	0	0	0	
OCCUPANT NAME PRINT AND SIGN			DATE OF INSPECTO'I		INSPECTOR PRINT AND SIGN	
OCCUPANT NAME PRINT AND SIGN			DATE OF INSPECTUT		INSPECTOR PRINT AND SIGN	