

Exit condition report – general tenancies (Form 14a)

Residential Tenancies and Rooming Accommodation Act 2008
(Section 66)



Address of the rental premises

| |
|----------|
| Postcode |
|----------|

Details of the tenant/s

| | |
|-----------------------------------|----------|
| Full name/s Forwarding address | Postcode |
| Mobile | |
| Email | |

| | |
|-----------------------------------|----------|
| Full name/s Forwarding address | Postcode |
| Mobile | |
| Email | |

| | |
|-----------------------------------|----------|
| Full name/s Forwarding address | Postcode |
| Mobile | |
| Email | |

Name/trading name of the lessor/agent

| | | |
|----|----|----|
| 1. | 2. | 3. |
|----|----|----|

Water meter reading at end of tenancy:

| | |
|----|---|
| 1. | / |
|----|---|

Note: Do not send to the RTA – give this form to the lessor/agent, keep a copy for your records.

| | | |
|-------------------|------|-----------------------|
| Tenant/s initials | Date | Lessor/agent initials |
|-------------------|------|-----------------------|



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 Insert **Y/✓** = Yes Insert **N/X** = No
 Undamaged Working Clean

 Tenant/s
 Comments (if any)

Lessor/agent
 Comment on tenant/s report

| Entry | Tenant/s | | | Comments (if any) | | |
|-----------------------|----------|----|----|-----------------------|--|--|
| 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 | | |



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Insert **Y/✓** = Yes
 Insert **N/X** = No
 Insert **Undamaged**
 Insert **Working**
 Insert **Clean**

Tenant/s

Comments (if any)

| Kitchen/meals | | |
|-------------------------|--|--|
| Doors/walls/ceiling | | |
| Windows/screens | | |
| Blinds/curtains | | |
| Fans/light fittings | | |
| Floor/floor coverings | | |
| Cupboards/drawers | | |
| Bench tops/sitting | | |
| 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 | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Lessor/agent

Comment on tenant/s report

| | | | | |
|-------------------|----|----|----|-----------------------|
| Tenant/s initials | 1. | 2. | 3. | Lessor/agent initials |
| | | | | |

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Insert **Y/✓** = Yes
Insert **N/X** = No
Underlined = Working
Comments (if any)

Tenant/s

Lessor/agent

Comment on tenant/s report

| | 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



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Insert **Y/✓** = Yes
Insert **N/X** = No
Underlined = Worked
Comments (if any)

Tenant/s

Comment on tenant/s report

Lessor/agent

Comment on tenant/s report

| 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 | | | |
| Tenant/s initials | 1. | 2. | 3. |
| Lessor/agent initials | | | |

Lessor/agent initials

Lessor/agent initials

3.

2.

1.



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| | | | |
|-------------------------|--------------------------|-------------------------------------|-----------|
| Insert Y/✓ = Yes | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Clean |
| Insert N/X = No | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Uncleaned |

Tenant/s
Comments (if any)

| Bathroom | | | |
|-----------------------|--------------------------|--------------------------|--|
| Doors/walls/ceiling | <input type="checkbox"/> | <input type="checkbox"/> | |
| Windows/screens | <input type="checkbox"/> | <input type="checkbox"/> | |
| Blinds/curtains | <input type="checkbox"/> | <input type="checkbox"/> | |
| Fans/light fittings | <input type="checkbox"/> | <input type="checkbox"/> | |
| Floor/floor coverings | <input type="checkbox"/> | <input type="checkbox"/> | |
| Bath | <input type="checkbox"/> | <input type="checkbox"/> | |
| Showershower screen | <input type="checkbox"/> | <input type="checkbox"/> | |
| Wash basin/vanity | <input type="checkbox"/> | <input type="checkbox"/> | |
| Mirror/cabinet | <input type="checkbox"/> | <input type="checkbox"/> | |
| Towel rails | <input type="checkbox"/> | <input type="checkbox"/> | |
| Power points | <input type="checkbox"/> | <input type="checkbox"/> | |
| Exhaust fan | <input type="checkbox"/> | <input type="checkbox"/> | |
| Toilet | <input type="checkbox"/> | <input type="checkbox"/> | |
| Toilet | | | |
| Doors/walls/ceiling | <input type="checkbox"/> | <input type="checkbox"/> | |
| Cistern | <input type="checkbox"/> | <input type="checkbox"/> | |
| Light fittings | <input type="checkbox"/> | <input type="checkbox"/> | |
| Exhaust fan | <input type="checkbox"/> | <input type="checkbox"/> | |
| Laundry | | | |
| Doors/walls/ceiling | <input type="checkbox"/> | <input type="checkbox"/> | |
| Windows/screens | <input type="checkbox"/> | <input type="checkbox"/> | |
| Blinds/curtains | <input type="checkbox"/> | <input type="checkbox"/> | |
| Fans/light fittings | <input type="checkbox"/> | <input type="checkbox"/> | |
| Floor/floor coverings | <input type="checkbox"/> | <input type="checkbox"/> | |
| Wash tubs | <input type="checkbox"/> | <input type="checkbox"/> | |
| Washing machine/dryer | <input type="checkbox"/> | <input type="checkbox"/> | |
| Power points | <input type="checkbox"/> | <input type="checkbox"/> | |

Lessor/agent
Comment on tenant/s report

Tenant/s initials 1. _____ 2. _____ 3. _____
Lessor/agent initials _____



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Insert **Y/✓ = Yes**
Insert **N/X = No**

Tenant/s
Comments (if any)

| General | Comments (if any) |
|----------------------------|-------------------|
| Smoke alarms | |
| Security devices | |
| Electrical safety switches | |
| Hot water system | |
| Keys/locks/remotes | |
| Staircases/railings | |
| Wheele & 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 | |

Additional comments/information

| Tenant 1 | Tenant 2 | Tenant 3 |
|------------|----------|-----------|
| Signature | Date | Signature |
| Print name | / / | / / |

Lessor/agent
Comment on tenant/s report

| Lessor/agent | Lessor/agent |
|--------------|--------------|
| Signature | Date |
| Print name | / / |