

Moving Checklist

Change Addresses With:

- | | |
|---|--|
| <input type="checkbox"/> Post Office | <input type="checkbox"/> Loan Companies |
| <input type="checkbox"/> Friends and Family | <input type="checkbox"/> Doctors |
| <input type="checkbox"/> Banks, Credit Unions | <input type="checkbox"/> Dentist |
| <input type="checkbox"/> Investment Companies | <input type="checkbox"/> Veterinarian |
| <input type="checkbox"/> Credit Card Companies | <input type="checkbox"/> Church |
| <input type="checkbox"/> Attorneys | <input type="checkbox"/> Clubs and Organizations |
| <input type="checkbox"/> Accountants | <input type="checkbox"/> Insurance Companies
(home, life, auto, medical, disability...) |
| <input type="checkbox"/> Schools | <input type="checkbox"/> Department of Motor Vehicles |
| <input type="checkbox"/> Pharmacists | <input type="checkbox"/> Magazines |
| <input type="checkbox"/> Social Security Department | <input type="checkbox"/> Book, Cd, DVD Clubs |
| <input type="checkbox"/> Veterans | <input type="checkbox"/> Catalogs |
| <input type="checkbox"/> Employer(s) | <input type="checkbox"/> Community Centers, Gyms... |
| <input type="checkbox"/> Voter Registration | <input type="checkbox"/> On all "Stop Services On" listed
below,
and set up new services |

Before Leaving, Stop Services On:

- | Old Service | | New Service |
|--------------------------|------------------------|--------------------------|
| <input type="checkbox"/> | Telephone | <input type="checkbox"/> |
| <input type="checkbox"/> | Cable, Satellite TV | <input type="checkbox"/> |
| <input type="checkbox"/> | Computer Services | <input type="checkbox"/> |
| <input type="checkbox"/> | Water/Sewer | <input type="checkbox"/> |
| <input type="checkbox"/> | Gas/Fuel Oil/Propane | <input type="checkbox"/> |
| <input type="checkbox"/> | Electricity | <input type="checkbox"/> |
| <input type="checkbox"/> | Water Softener Company | <input type="checkbox"/> |
| <input type="checkbox"/> | Grocery Delivery | <input type="checkbox"/> |
| <input type="checkbox"/> | Newspaper/Publications | <input type="checkbox"/> |
| <input type="checkbox"/> | Lawn/Snow Service | <input type="checkbox"/> |
| <input type="checkbox"/> | Garbage Company | <input type="checkbox"/> |

Things To Do Before Moving:

- _____ Dry Cleaners, Laundry Service, Shoe Repair, Alterations Co.
- _____ Cancel Homeowners Insurance (only after closing)
- _____ Return library books
- _____ Transfer bank accounts, empty safety deposit box
- _____ Get x-rays if needed
- _____ Get updates on all prescriptions including eye glasses
- _____ Get job references if needed
- _____ Get school transcripts
- _____ Set up stop payments on automatic transfers and re-setup
- _____ Get refunds on any deposits you have out
- _____ Return any borrowed items to their rightful owners
- _____ Request items be returned that you borrowed out
- _____ Make sure you have insurance on your personal property items
- _____ Secure cash and travelers checks for trip
- _____ Defrost freezer and clean all appliances
- _____ Assemble moving kit - hammer, nails, pliers, tape, flash light, scissors, first aid kit, emergency numbers, batteries, cell phone charger, snacks for people and pets
- _____ Fully charge cell phones
- _____ Arrange for child and pet care for moving day
- _____ Make plan of how moving day will go - time line
- _____ Arrange for hotel rooms if needed
- _____ Put aside specialty items/favorites for children and pets - toys, blanket, bottle, books, treats...
- _____ Get car pills for traveling if needed

On Moving Day:

- _____ Have a cell phone handy
- _____ Pack your clothes, medications, necessities, money, moving kit, identification...and put where movers don't pack (in your car)
- _____ Take old telephone book and your personal address book
- _____ Know emergency road service number
- _____ Have your moving kit handy, but don't let it get packed
- _____ Take children and pets to day care locations
- _____ Leave keys and garage door opener in house or with agent
- _____ Have time line for moving day handy

- _____ Make sure someone has your itinerary for the trip
- _____ Set out trash or make arrangements to do so
- _____ Check out cabinets, closets and drawers one more time
- _____ Grab your car keys, purse, wallet, cell phone, medications, maps, time line for moving, hotel reservations...check over this list one more time to make sure you have everything
- _____ Count heads to make sure you have everyone
- _____ Lock up and get moving