

# Apartment Condition Report

Address, Apartment Number \_\_\_\_\_

Rental Property \_\_\_\_\_

|                   |    |    |    |    |             | Check-Out Condition |    |    |    |             | Charge |
|-------------------|----|----|----|----|-------------|---------------------|----|----|----|-------------|--------|
|                   | VG | GO | FA | PO | Description | VG                  | GO | FA | PO | Description |        |
|                   |    |    |    |    |             |                     |    |    |    |             |        |
| / Lights          |    |    |    |    |             |                     |    |    |    |             |        |
|                   |    |    |    |    |             |                     |    |    |    |             |        |
|                   |    |    |    |    |             |                     |    |    |    |             |        |
|                   |    |    |    |    |             |                     |    |    |    |             |        |
|                   |    |    |    |    |             |                     |    |    |    |             |        |
| / Lights<br>rator |    |    |    |    |             |                     |    |    |    |             |        |
| ave               |    |    |    |    |             |                     |    |    |    |             |        |
| ards              |    |    |    |    |             |                     |    |    |    |             |        |
| r                 |    |    |    |    |             |                     |    |    |    |             |        |
| 1                 |    |    |    |    |             |                     |    |    |    |             |        |
| / Lights          |    |    |    |    |             |                     |    |    |    |             |        |
| hower             |    |    |    |    |             |                     |    |    |    |             |        |
| Rack              |    |    |    |    |             |                     |    |    |    |             |        |
| / Cabinet         |    |    |    |    |             |                     |    |    |    |             |        |
| 1                 |    |    |    |    |             |                     |    |    |    |             |        |
|                   |    |    |    |    |             |                     |    |    |    |             |        |
| / Lights          |    |    |    |    |             |                     |    |    |    |             |        |
|                   |    |    |    |    |             |                     |    |    |    |             |        |
|                   |    |    |    |    |             |                     |    |    |    |             |        |
| s                 |    |    |    |    |             |                     |    |    |    |             |        |
| ames              |    |    |    |    |             |                     |    |    |    |             |        |
| ses               |    |    |    |    |             |                     |    |    |    |             |        |
| :                 |    |    |    |    |             |                     |    |    |    |             |        |
|                   |    |    |    |    |             |                     |    |    |    |             |        |
|                   |    |    |    |    |             |                     |    |    |    |             |        |
|                   |    |    |    |    |             |                     |    |    |    |             |        |

new or slightly used. No Stains, marks, scratches, chips, etc.  
 ear and/or minor scratches, stains, chips, etc.  
 worn. May be scratched, stained, or chipped. Minor pieces  
 but the structure is sound.  
 damaged. Missing or broken pieces and structural damage.

Other Charges (Description):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Total Charges: \$ \_\_\_\_\_

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 I read the above statement and Apartment Condition Report and accept the Apartment Condition Report as accurate and correct. By signing, I hereby represent that all tenants of this apartment verify that this report is true and accurate.

**Check-Out**

Signature \_\_\_\_\_ Date \_\_\_\_\_ Student Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_ Staff Signature \_\_\_\_\_ Date \_\_\_\_\_

