## Apartment Condition Report

**Name(s):**

**Building, Address, Apartment Number:**

**Landlord, Rental Property:**

<table>
<thead>
<tr>
<th>Item</th>
<th>Check-In Condition</th>
<th>Check-Out Condition</th>
<th>Charge</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Living Room</strong></td>
<td>VG</td>
<td>GO</td>
<td>FA</td>
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<td>Walls</td>
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<td>Towel Rack</td>
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| **Other Charges (Description):**
|                   |                  |                    |       |      |             |      |      |      |      |             |
| **Total Charges:** | $                  |                    |       |      |             |      |      |      |      |             |

*VG: Appears new or slightly used. No Stains, marks, scratches, chips, etc.*

*GO: Some wear and/or minor scratches, stains, chips, etc.*

*FA: Clearly worn. May be scratched, stained, or chipped. Minor pieces missing, but the structure is sound.*

*PO: Badly damaged. Missing or broken pieces and structural damage.*

---

I have 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-In**

<table>
<thead>
<tr>
<th>Student Signature</th>
<th>Date</th>
<th>Student Signature</th>
<th>Date</th>
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**Check-Out**

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## Apartment Condition Report Page 2

**Name(s):**

**Building and Apartment Number:**

**Landlord, Rental Property:**

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Other Charges (Description):

Total Charges: $______

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</tr>
<tr>
<td>Staff Signature</td>
<td>Staff Signature</td>
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<td>Date</td>
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Name(s) ____________________________________________________________________________________________________________

Building and Apartment Number _______________________________________________________________________________________

Other Charges (Description):

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Check-In

Student Signature_________________________  Date_________  Staff Signature_________________________  Date_________

Check-Out

Student Signature_________________________  Date_________  Staff Signature_________________________  Date_________