**Facility Room Condition Report**

Chapter \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Room #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Roommate(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I understand that this form reflects the condition of the room that I have rented from my ZBT Chapter and Landlord and that I am to return the room in good condition at the conclusion of this Agreement. I further understand that I am obligated to schedule a time to check out of my room with the House Manager or his designee or risk being fined. Finally, I agree that if damage occurs to the room, the cost of repairs will be charged to my Security Deposit. Examples of damage that will result in charges include but are not limited to: damage to or missing furniture; damage to or holes in doors; litter, trash, items left in drawers, holes in woodwork or ceilings; stains on carpet, etc.

ROOM CONDITION

Check Point Check-in Check-out

|  |  |  |
| --- | --- | --- |
| Walls | Good Fair Poor Missing N/A Comments: | Good Fair Poor Missing N/A Comments: |
| Blinds/Windows  Treatments | Good Fair Poor Missing N/A Comments: | Good Fair Poor Missing N/A Comments: |
| Windows | Good Fair Poor Missing N/A Comments: | Good Fair Poor Missing N/A Comments: |
| Screens | Good Fair Poor Missing N/A Comments: | Good Fair Poor Missing N/A Comments: |
| Carpet | Good Fair Poor Missing N/A Comments: | Good Fair Poor Missing N/A Comments: |
| Furniture | Good Fair Poor Missing N/A Comments: | Good Fair Poor Missing N/A Comments: |
| Bed (frame & mattress) | Good Fair Poor Missing N/A Comments: | Good Fair Poor Missing N/A Comments: |
| Desk | Good Fair Poor Missing N/A Comments: | Good Fair Poor Missing N/A Comments: |
| Chair | Good Fair Poor Missing N/A Comments: | Good Fair Poor Missing N/A Comments: |
| Dresser (if applicable) | Good Fair Poor Missing N/A Comments: | Good Fair Poor Missing N/A Comments: |
| Woodwork | Good Fair Poor Missing N/A Comments: | Good Fair Poor Missing N/A Comments: |
| Drawers | Good Fair Poor Missing N/A Comments: | Good Fair Poor Missing N/A Comments: |
| Closet | Good Fair Poor Missing N/A Comments: | Good Fair Poor Missing N/A Comments: |
| Miscellaneous  (please specify) | Good Fair Poor Missing N/A Comments: | Good Fair Poor Missing N/A Comments: |

Additional Comments on reverse side

**Additional Comments**

Tenant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (check in)

Signature of House Manager or Designee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (check in)

Tenant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (check out )

Signature of House Manager or Designee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(check out )