FL-RTG-20 Florida

## **CHECK-IN/CHECK-OUT CONDITION REPORT**

TENANT(S):		
ADDRESS:		UNIT:
CITY:	STATE:	ZIP:

Rating Scale = (E)Excellent (VG) Very Good (G)Good (F)Fair (P)Poor								
	IN	Out		In	Out		In	Out
LIVING AREAS			KITCHEN			BEDROOM 3		
Walls			Walls			Walls		
Windows			Stove/Racks			Windows		
Blinds/Drapes			Refrigerator			Blinds/Drapes		
Rods			Ice Trays			Rods		
Floor			Shelves/Drawer			Floor		
Carpet/Vinyl/Wood			Disposal			Light Fixtures		
Light Fixtures			Dishwasher			Doors/Woodwork		
Doors/Woodwork			Counter Tops			Locks		
Locks			Cabinets			Ceilings		
Ceilings			Sink	F		Electric Outlets		
Electrical Outlets			Floor					
Garbage Cans			Windows					
TV Antenna/Cable			Blinds/Drapes			BATH ROOM		
Fireplace		dite				Towel Bars		
Cleanliness						Sink & Vanity		
						Toilet		
BEDROOM 1	Y		BEDROOM 2			Tub/Shower		
Walls			Walls			Fan (Exhaust)		
Windows			Windows			Floor		
Blinds/Drapes			Blinds/Drapes			Electric Outlets		

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Rating Scale = (E)Exc	ellent (VC	G) Very Go	ood (G)Good (F)Fair	(P)Pooi		
Rods			Rods		Light Fixtures	
Floor			Floor			
Light Fixtures			Light Fixtures		Essential Services	
Doors/Woodwork			Doors/Woodwork		Plumbing	
Locks			Locks		Heating	
Ceilings			Ceilings		Electricity	
Electrical Outlets			Electric Outlets		Hot Water	
					Smoke Detectors	

**Description of Damage:** 

Tenant

Tenant

Landlord

## I accept this unit in the above condition:

Date

Date

Date

## I left this unit in the above condition:

Tenant

Tenant

Landlord

Date

Date

Date

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## SECURITY DEPOSIT NOTIFICATION

Tenant has paid \$\_\_\_\_\_ for a security deposit. Tenant is hereby given notice that the security deposit paid will be held at the following financial institution:

Name of Financial Institution:

Address/Location:

Tenant will be provided written notice of any subsequent change of financial institutions where the security deposit is held. The security deposit monies \_\_\_\_\_ are not commingled with other funds of the landlord.

Tenant is hereby notified that the security deposit is being held in an \_\_\_\_\_ interest bearing or \_\_\_\_\_\_ non-interest bearing account. If interest bearing, the Tenant will receive \_\_\_\_\_\_% interest. Interest will be paid annually.

If any of the above information changes, Landlord shall notify the Tenant within 30 days of the change.

Landlord

Date

Upon vacating the premises for termination of the lease, if the landlord does not intend to impose a claim on the security deposit, the landlord shall have 15 days to return the security deposit to-gether within interest, if otherwise required, or the landlord shall have 30 days to give the tenant written notice by certified mail to the tenant's last known mailing address of his or her intention to impose a claim on the deposit and the reason for imposing the claim. The notice shall contain a statement in substantially the following form:

This is a notice of my intention to impose a claim for damages in the amount of \_\_\_\_\_\_ upon your security deposit due to \_\_\_\_\_\_. It is sent to you as required by s. 83.49(3), Florida Statutes. You are hereby notified that you must object in writing to this deduction from your security deposit within 15 days from the time you receive this notice or I will be authorized to deduct my claim from your security deposit. Your objection must be sent to the following address:

	(Landlord's A	ddress)	
Received:			
Tenant	Date	Tenant	Date

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