KY-RTG-20 Kentucky

CHECK-IN/CHECK-OUT CONDITION REPORT

TENANT(S):UNIT:UNI										
O THE T				STATE	3:	OT(III)				
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		1	Ceilings				
Ceilings			Sink			Electric Outlets				
Electrical Outlets			Floor	/						
Garbage Cans			Windows							
TV Antenna/Cable		4	Blinds/Drapes			BATHROOM				
Fireplace						Towel Bars				
Cleanliness						Sink & Vanity				
						Toilet				
BEDROOM 1			BEDROOM 2			Tub/Shower				
Walls			Walls			Fan (Exhaust)				
Windows		1	Windows			Floor				
Blinds/Drapes			Blinds/Drapes			Electric Outlets				
Rods			Rods			Light Fixtures				
Floor			Floor							
Light Fixtures			Light Fixtures			Essential Service	S			
Doors/Woodwork			Doors/Woodwork			Plumbing				
Locks			Locks			Heating				
Ceilings			Ceilings			Electricity				
Electrical Outlets			Electric Outlets			Hot Water				
						Smoke Detectors				

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			KY-RTG-20 Kentucky
Description of Damag	e:		
Estimated Cost of Repa	ir Existing Damage \$	Estimated Cost of Repair	• (after occupancy) \$
I accept this unit in th	e above condition:	I left this unit in the second s	ae above condition:
Tenant	Date	Tenant	Date
Tenant	Date	Tenant	Date
Landlord	Date	Landlord	Date
RECEIPT			
deposit in the above	e amount will be held	y deposit. Tenant is hereby gi at the following investment and loan association:	

Name:		
Address:		
Account Number:		
Tenant is hereby notified that they may be present a	t the move-out inspec	tion.
Received:		
Accelved.		
Tenant Date	Tenant	Date

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