

STATEMENT OF CONDITIONS

Date _____

Facility/Unit# _____

You have 48 hours to accept this Statement of Condition of the above unit as accurate and correct or to add any defects you may find during move in. This form must be signed and returned to Lessor within the specified time accepted as-is or with your additional findings attached hereto or on a separate piece of paper. Your failure to return this form, signed within that time period, may be viewed by a court as your agreement that the statement below is correct.

The Lessor/Agent reports that, as of the above date, the premises and all items listed below are in clean, move in condition, free from significant damage or defect and not in violation of any state sanitary code.

The Lessee further agrees that any damage caused by Lessee, invitees or guests due to negligence will be the responsibility of the Lessee. Lessor will make repairs, and upon completion, Lessee shall pay Lessors costs for making such repairs.

Debris & Items

Swept

Damage (Exterior & Interior Walls, Doors)

Accepted as correct statement of condition by the Lessee (s) on ___/___/___ by:

Lessee

Lessor/Agent

OR

Rejected, and a separate statement delivered to Lessor/Agent on ___/___/___ by:

Lessee

Lessor/Agent