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| **Statement of Condition** | | | | |
| **Property Address: Date:** | | | | |
| **This is a statement of the condition of the premises you have rented. You should read it carefully for accuracy. If you accept the current condition of the property please sign below. Your signature indicates that you agree that the condition indicated here is complete and accurate. If it is not complete and/or accurate, you must note your corrections on any aspect of the home in the area provided. Additional pages may be attached if necessary. Upon termination of your lease, apparent damages not indicated in this Statement of Condition may be deducted from the security deposit.** | | | | |
| **You have 15 days from the date indicated above to accept this Statement of Condition as accurate and correct or to add any additional defects you may find during move in. Within that timeframe this form must be submitted to Crossman Properties.** | | | | |
| **Thank you for taking the time to complete and return this document.** | | | | |
| **Tenant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | |
| **Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | |
| **Lessor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | |
| **Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | |
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|  | **Issue Category: (check applicable box)** | | | |
| **Room/Item** | **Cleanliness** | **Damaged** | **Inoperable** | **Comments** |
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| **Additional notes:** |  |  |  |  |