

**Theta Chi Fraternity  
Chi Chapter – Auburn University**

## Assessment of Condition of Rental Property

This checklist will help you protect your initial deposit. Using the key below, fill in the letter that best describes the condition of your room when you begin your lease, and then give a copy of this checklist to the House Corporation to be filed away. When you move out, request this checklist from the House Corporation, fill in the "End of Lease" column, and then return it to the House Corporation. The House Corporation and/or its agents will also make an assessment of the condition of your room.

Key	
Missing	<b>M</b>
Good condition	<b>G</b>
Scratched	<b>S</b>
Damaged	<b>D</b>
Broken	<b>B</b>
Repair needed	<b>R</b>

<b>Name</b>	
<b>Room #</b>	
<b>Move-in Inspection Date</b>	
<b>Move-out Inspection Date</b>	

Residence Room	Start of lease	End of lease	House Corporation end-of-lease assessment	Comments
Door (including door closer)				
Door lock (including key)				
Carpet				
Walls				
Ceiling				
Window and frame/sill				
Window screen				
Window treatments (blinds)				
Closet and shelving				
Light fixtures and bulbs				
Switches and outlets				
Phone jack				
Cable TV and internet jacks				
Booster heater				
Loft ladder				
Loft railing				

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Residence Room	Start of lease	End of lease	House Corporation end-of-lease assessment	Comments
Mattress				
Tile floor in loft				
Cleanliness				

Administrative (House Corporation use only)	
Deposit paid in full? <input type="checkbox"/> Yes <input type="checkbox"/> No	If 'Yes', specify date paid:
Total charged for damages, painting and cleaning:	
Deposit as of follow-up or final inspection:	
Amount to <input type="checkbox"/> return to or <input type="checkbox"/> collect from tenant:	\$
Paid amount in full? <input type="checkbox"/> Yes <input type="checkbox"/> No	If 'Yes', specify date tenant paid additional charges:
Returned amount in full? <input type="checkbox"/> Yes <input type="checkbox"/> No	If 'Yes', specify date deposit returned to tenant:

Signatures	
_____	_____
House Corporation Representative	Tenant
Date:	Date: