PLEDGE
PROPERTY MANAGEMENT

RESIDENT _____

UNIT NO. _____ ADDRESS _____

MOVE-IN DATE _____ MOVE-OUT DATE _____

INSTRUCTIONS: Note Move-In Exceptions or Move-Out Conditions in the space below or write "NA" if item does not apply. Check walls, ceilings, carpet/floors, lights, blinds, rods, doors and windows in all rooms.

Item	Move-In Exceptions	Move-Out Condition
Kitchen		
Oven/Stove,Fridge, Dishwasher,Micro/Hood		
Sink,Cabinets,Counters		
Living Room		
Dining Room		
Master/Bedroom 1		
Bedroom 2		
Bedroom 3 /Office		
Other Room(s)		
Hallways/Stairs		
Full Bathroom		
Extra Bathroom(s)		
Basement		
Mechanical Room/Utility		
Washer/Dryer		
Oil Level		
Gas Level		
Air/Water Filter		
Deck/Patio		
Grass/Landscaping		
Smoke/CO Detectors		
Storage/Parking Areas		
Odors		
Light Bulbs		
Blinds/Curtains		
Windows/Doors		
Exterior		
Move-In Comments		Move-Out Comments

Number of Keys Unit _____ Entry_____ Mailbox_____ Other _____

Filter Size _____

The premises are delivered in clean and good condition, with no stains, marks or damages unless noted below. Resident has inspected the above premises prior to occupancy and accepts it with the conditions and/or exceptions noted above. Resident agrees to deliver premises in like condition upon termination of

Resident Signature _____ Date _____

Inspector Name _____ Date _____