



FOREST PARK APARTMENTS

1501 E. GARDNER LANE
PEORIA HEIGHTS, ILLINOIS 61616
PHONE: 309-682-8532

**MOVE-IN/MOVE-OUT
CONDITION FORM**

NAME _____ APT.# _____ PHONE # _____

SPECIFY DAMAGED ITEMS ONLY

CHECK-IN CONDITION	CHECK-OUT CONDITION	CHARGE
KITCHEN		
Refrigerator _____	_____	_____
Range & Oven _____	_____	_____
Rangehood _____	_____	_____
Disposal _____	_____	_____
Countertops _____	_____	_____
Sink _____	_____	_____
Cabinets _____	_____	_____
Walls & Woodwork _____	_____	_____
Light Fixture & Bulbs _____	_____	_____
Other (explain) _____	_____	_____
DINING/LIVING ROOM		
Light Fixture & Bulbs _____	_____	_____
Entry Door _____	_____	_____
Walls & Woodwork _____	_____	_____
Windows & Screens _____	_____	_____
Other (explain) _____	_____	_____
BATHROOM		
Sink, Tub & Tile _____	_____	_____
Countertop _____	_____	_____
Medicine Cabinet & Bulbs _____	_____	_____
Shower Rod _____	_____	_____
Door _____	_____	_____
Toilet & Toilet Seat _____	_____	_____
Walls & Woodwork _____	_____	_____
Other (explain) _____	_____	_____
BEDROOMS		
Walls & Woodwork _____	_____	_____
Air Conditioner _____	_____	_____
Door _____	_____	_____
Windows & Screens _____	_____	_____
Other (explain) _____	_____	_____
CLOSET DOORS, Shelves & Rods _____	_____	_____
BASEBOARD HEATERS _____	_____	_____
CARPETING _____	_____	_____
KEYS - ISSUED <u>2 sets of door keys and 2 mail box keys</u>	RETURNED _____	
KEYS - POOL TAG/S # _____		
REQUIRED SECURITY DEPOSIT <u>\$350.00</u>	INTEREST _____	

I/WE AGREE THAT THE UNIT IS IN ACCEPTABLE CONDITION. I/WE UNDERSTAND THAT I/WE WILL BE CHARGED FOR ALL DAMAGE EXCEPT ITEMS CITED HEREON UPON MOVE-IN.

RESIDENT _____ RESIDENT _____ DATE _____

FOREST PARK _____ DATE _____

I/WE ACCEPT THE AFOREMENTIONED CHECK-OUT CONDITION LIST AS A PART OF THE RENTAL CONTRACT AND AGREE THAT IT IS AN ACCURATE ACCOUNT OF THE CONDITION OF SAID PREMISES.

RESIDENT _____ RESIDENT _____ DATE _____

FOREST PARK _____ DATE _____

TOTAL DAMAGE & CLEANING CHARGES DUE \$ _____

Return 72 Hours After Move In Date