

ROOM CONDITION FORM

Name _____ ID# _____
last first

Location _____ Date _____ Fall / Spring / Summer (circle one)
building module room (example: krh-1-109)

CONDITION: 0 - Item not applicable 1- New 2 - Good 3 - Average 4 - Below Average 5 - Missing

	Check-in Condition Inventory		Comments/Description	Check-out Condition Inventory		Charges
Door/entry						
Carpet/flooring						
Walls						
Ceiling						
Window/screen						
Drapes/blinds						
Bulletin board						
Smoke detector						
Mirror						
Lights/outlets						
Towel rack/towel board						
Cabinets/shelving						
Dresser/drawers						
Closet/wardrobe interior						
Closet/wardrobe doors						
Desk						
Desk light/surge protector						
Chairs						
Phone jack/tail						
Bed frame						
Mattress/box spring						
Shower rod/curtain						
Toilet						
Sink						
Bathroom door						
Heat/air conditioner						
Power supply hub						

Notes _____ **Total** _____

I have read this form and I agree with the evaluation of the room's condition. I understand and agree that after I have checked out with my RA, additional assessments and charges may be made by Facilities Management in addition to this form. I have also read and agree with the Common Area Form that applies to the Living Area to which I have been assigned. I understand that all fines for damage caused by negligence or misuse will be charged to my account.

Key# Issue _____ Date _____ Key# Returned _____ Date _____

Check-in: Student _____ Date _____ RA _____

Check-out: Student _____ Date _____ RA _____