

DILLON HALL RESIDENCES
Student Off-Campus Housing

STATEMENTS OF CONDITIONS

This is a statement of the conditions of the premises you have rented. You should read it carefully for accuracy. If you agree that the conditions are represented accurately you must sign and date this document. Your signature indicates that you agree that the conditions indicated here are complete and accurate. If it is not complete and/or accurate, you must note your corrections in the area provided. You may also attach a separate signed list of any damage you believe exists in the premises.

Make a copy of this statement for your records. This statement must be returned to the Landlord or Property Manager within fifteen (15) days after you receive the list or within (fifteen (15) days after you move in, whichever is later. If you do not return this statement of conditions, within the specified time allowed, a court may later view your failure to return the list as your agreement that the statement of conditions is complete and correct.

Thank you for taking the time to complete and return this document. I have provided a self-addressed stamped envelope for your convenience.

Kitchen	OK	Comments / Notes
Sink		
Sprayer		
Counter Tops		
Back Splash		
Range Hood /Fan		
Range Hood Light		
Refrigerator		
Clean		
Light		
Shelves		
Drawers		
Stove/Oven		
Burners		
Knobs/Switches		
Clean		
Racks		
Oven Window		
Oven Light		
Kitchen Table w/ 4 chairs		
Cabinets/Cupboards/Drawers		
Doors		
Shelves		
Latches		

Kitchen (continued)	OK	Comments / Notes
Drawer Glides		
Windows/Storms/Screens		
Floor		
Walls		
Ceiling		
Baseboards		
Closet Interior, if applicable		
Closet Door, if applicable		
Wall Outlets		
Light Fixture		
Bathroom	OK	Comments / Notes
Toilet		
Sink		
Sink Faucets		
Tub/Shower		
Tub/Shower Faucets		
Tub Caulking		
Vanity		
Doors		
Drawer Glides		
Shelving		
Linen Closet, if applicable		
Wall/Ceiling Light/Fixtures		
Exhaust Fan		
Mirror		
Toilet Tissue Paper Holder		
Towel Bar		
Window, if applicable		
Floor		
Walls		
Ceiling		
Baseboards		
Wall Outlets		
Living Room	OK	Comments / Notes
Windows/Storms/Screens		
Floor		

Living Room (continued)	OK	Comments / Notes
Walls		
Ceiling		
Ceiling Fan		
Light Fixture		
Baseboards		
Cable Outlet & Router		
Furniture		
Sofa		
Soft Chair(s)		
Coffee Table		
Armless Chair		
Wall Outlets		
Bedroom 1	OK	Comments / Notes
Windows/Storms/Screens		
Window Shades/Blinds		
Floor		
Walls		
Ceiling		
Ceiling Fan, if applicable		
Light Fixture		
Baseboard/Radiator, if applicable		
Closet Interior/Shelf		
Doors		
Furniture		
Bed		
Mattress		
Chair		
Desk		
Dresser		
Desktop Hutch, if applicable		
Wall Outlets		
Bedroom 2	OK	Comments / Notes
Windows/Storms/Screens		
Window Shades/Blinds		
Floor		
Walls		

Bedroom 2 (continued)	OK	Comments / Notes
Ceiling		
Ceiling Fan, if applicable		
Light Fixture		
Baseboard/Radiator, if applicable		
Closet Interior/Shelf		
Doors		
Furniture		
Bed		
Mattress		
Chair		
Desk		
Dresser		
Desktop Hutch, if applicable		
Wall Outlets		
Bedroom 3	OK	Comments / Notes
Windows/Storms/Screens		
Window Shades/Blinds		
Floor		
Walls		
Ceiling		
Ceiling Fan, if applicable		
Light Fixture		
Baseboard/Radiator, if applicable		
Closet Interior/Shelf		
Doors		
Furniture		
Bed		
Mattress		
Chair		
Desk		
Dresser		
Desktop Hutch, if applicable		
Wall Outlets		
Bedroom 4	OK	Comments / Notes
Windows/Storms/Screens		
Window Shades/Blinds		

Bedroom 4 (continued)	OK	Comments / Notes
Floor		
Walls		
Ceiling		
Ceiling Fan, if applicable		
Light Fixture		
Baseboard/Radiator, if applicable		
Closet Interior/Shelf		
Doors		
Furniture		
Bed		
Mattress		
Chair		
Desk		
Dresser		
Desktop Hutch, if applicable		
Wall Outlets		

Tenant Signature _____ Date _____
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Tenant Signature _____ Date _____
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Tenant Signature _____ Date _____
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Tenant Signature _____ Date _____
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