ADDENDUM B

APARTMENT CONDITION REPORT

This Addendum is a part of your Lease.

Tenant:

APARTMENT CONDITION. Tenant acknowledges he (she) has inspected the apartment and that said apartment is in good condition with the exceptions as noted hereunder. If Tenant fails to notify Landlord by a written statement within three (3) days after occupancy of any deficiencies not previously noted, then the condition noted hereunder shall be the conclusive determination of the apartment condition at time of occupancy. THIS REPORT WILL BE USED TO DETERMINE THE REFUND OF SECURITY DEPOSIT (IF ANY) AT THE END OF YOUR LEASE OCCUPANCY.

Apartment Name/Address: Security Deposit: Last month rent Non-Refundable Cleaning	XXXX Studios, XXXX Avenue NE, Seattle, WA \$ Move In Date: \$ Move Out Date:			
Total:	\$	_		
Inspection Performed by:	on			
ITEMS	CONDITION MOVE-IN	CONDITION MOVE –OUT	COST TO CORRECT	
Living Area	110 (2 11 (110 12 001		
Doors and Locks				
Floors and Baseboards				
Walls and Ceilings				
Windows and Blinds				
Electrical Fixtures				
Closet				
Other				
Microwave				
Refrigerator				
Desk				
Counter Top				
Bed Frame				
Bathroom				
Floors and Baseboards				
Walls and Ceilings				
Medicine Cabinet				
Shower				
Faucets				
Toilet				
Electrical Fixtures				
Vanity				
Shower Curtain				
Other				
General				
Smoke Detector				
CO2 Detector				
Keys				
Fob	One			
Mail Box	One			
Room	One			
Bathroom				
Other				
	Mgr. Init Ten. Init.	Mgr. Init Ten. Init.	TOTAL \$	
		Unpaid Rent Total of Forfeiture Refund	\$ \$ \$	

Amount Due Landlord

XXXX STUDIOS, UNIT			
ACKNOWLEDGED AND AGREED:			
TENANT:			
Date:	-		
MANAGER:			
Date:	-		
Forwarding Address upon Vacating:			
Name:			
Phone:			
Address:			
City:	State:	Zip	
County:			
This security deposit settlement upon vacatin	g performed by:		
	(]	Manager)	
Date:			