



BELVEDERE AMENITY CENTER CHECKSHEET

<u>Item</u>	<u>Check-in condition</u>	<u>Check-out condition</u>
FLOOR/RUGS	_____	_____
SINK	_____	_____
CABINETS	_____	_____
APPLIANCES	_____	_____
TV	_____	_____
TABLES	_____	_____
OVERHEAD LIGHTS	_____	_____
WINDOWS	_____	_____
WINDOW LEDGES	_____	_____
FRONT DOOR	_____	_____
BATHROOMS	_____	_____
ENTRY WAY	_____	_____
BROOM, MOP	_____	_____
FURNITURE	_____	_____
PATIO/FIREPLACE	_____	_____
OUTDOOR GRILL	_____	_____
OTHER	_____	_____

Owner/Tenant (either one)

Belvedere Homeowners Association, Inc.

Signature

By _____
Signature

Printed Name

Printed Name

Date

Date

For Office use only:

Date _____

- \$100 security deposit and
 - TABC license copy was received
- (check if applicable)

Signature of person receiving deposit