## The Birches Clubhouse Checklist

Your security deposit will not be returned until this form is signed as being in acceptable condition and returned to the Management Office.

DATE OF FUNCTION: _		TIME OF FUNCTION: TO				
RESIDENT NAME		ADDRESS		PHONE #		
	C	ONDITION OF C	LUBHOUSE			
BEFORE FUNCTION:	GOOD	POOR	AFTER:	GOOD	POOR	
CARPET:						
KITCHEN FLOOR:						
KITCHEN:						
REFRIGERATOR (Empty of Food) WALLS:						
CEILING:						
BATHROOMS:						
LIVING AREA:						
TABLES/CHAIRS:						
PLEASE CHECK OFF T	HE ITEMS B	ELOW AS THEY	ARE DONE:			
ALL DOOF	RS LOCKED		SLIDER BLINDS	OPENED		
HEAT NO	LOWER THA	N 60 DEGREES	– A/C TURNED [	OOWN		
ALL LIGHT	S TURNED	OFF				
COMMENTS:						

RESERVING RESIDENT SIGNATURE