

## ROOM CONDITION FORM

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Room No \_\_\_\_\_

The purpose of this form is to protect both the resident and UBD Corp on any damage charges and to provide for maintenance corrections. Check the room condition very carefully or you will be charged for any damages to your room. Penalty charges of the damage can be found in the Residential Handbook. All roommates are responsible for the common area.

Items	Check-in Conditions	Comments	Check-out Conditions	Comments
Room Key				
Ceiling Fan				
Lightnings				
Mattress & Bed Frame				
Bed Linen (if applicable)				
Bed side table				
Pillow (if applicable)				
Cabinet / Wardrobe				
Study table				
Study Chair				
A/C				
A/C remote				
Door				
Window				
Walls				
Ceiling				
Curtain/Blinds				

Items	Check-in Conditions	Comments	Check-out Conditions	Comments
Sofa				
Coffee table				
Curtains				
Windows				
Wall				
Ceiling				
Floor				
Lightings				
Ceiling fan				
Main door				
AC (if applicable)				
A/C remote (if applicable)				
Stove, Oven, Range hood				
Microwave				
Kettle				
Sink and Faucet				
Dining table and Chairs				

Refrigerator				
Lightings				
Cabinets and drawers				
Kitchen counter				
Kitchenware				
Others				
Balcony :				
Metal Cloth hanger				
Washing Machine				
Sink & Faucet				
Lightings				
Others				

Water Heater				
Shower head				
Sink & Faucet				
Toilet bowl				
Lightings				
Others				

By signing this form, I accept all responsibility for the proper care of the room and its equipment; I understand that charges may apply for any damages, lost items; transfer of equipment between rooms and public area is my own liability.

**Acknowledgement on Check-In**

Check-in Resident's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Staff's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Acknowledgement On Check-Out**

Check-out Resident's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Staff's Signature: \_\_\_\_\_ Date: \_\_\_\_\_