

# ***Corporate Housing Associates, LP*** ***Woodlands Interim Housing***

## ***Move-In Report***

*In order to assist Corporate Housing Associates in providing superior customer care, please take a moment to look around your new apartment home and let us know about any damages, maintenance needs, or special requests you may have. Then, simply fax the form to us at 281-210-3409.*

*This form will also serve as reference in the unlikely event that you discover damages to the apartment upon your arrival. Damages that are not previously noted become the financial responsibility of the last tenant. Thank you for your assistance!*

### ***How does it look?***

**CARPET** \_\_\_\_\_

\_\_\_\_\_

**WALLS** \_\_\_\_\_

\_\_\_\_\_

**BLINDS** \_\_\_\_\_

\_\_\_\_\_

**FLOORS** \_\_\_\_\_

\_\_\_\_\_

**FURNITURE** \_\_\_\_\_

\_\_\_\_\_

**HOUSEWARES** \_\_\_\_\_

\_\_\_\_\_

**DOES THE APARTMENT APPEAR CLEAN AND SMELL FRESH?** \_\_\_\_\_

\_\_\_\_\_

**WILL THERE BE PETS IN THE APARTMENT?** \_\_\_\_\_

**WILL ANY OCCUPANTS BE SMOKING IN THE APARTMENT?** \_\_\_\_\_

*Your answer does not constitute an automatic fee.*

*Minimal fees incurred **only** in the event apartment requires professional odor treatment.*

**YOUR THOUGHTS** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**YOUR NAME** \_\_\_\_\_ **APT #** \_\_\_\_\_

*Thank you*