

APARTMENT CONDITION STATEMENT

This is a statement of the condition of the premises you have rented. Please read it carefully. Make sure the information is correct. If it correct, sign and date this form where provided below and return it to DELPHI PROPERTIES, LLC. This showed you agreed with the statement.

If you believe it to be incorrect, you must attach a separate, signed list of any damages, which you believe exist and have not been recorded herein. This is for record purposes only.

This statement must be returned to DELPHI PROPERTIES, LLC within fifteen (15) days after you receive it, or within fifteen days after you move in, whichever is later. If you do not return this list within the specified time period, your failure to return this list shall be accepted as your agreement that this list is complete, accurate and correct. Failure to return this record may affect full recovery of your Security Deposit at the time you quit and vacate subject premises.

(Lessee[s])	
Address:	Apartment #:
 DELPHI PROPERTIES Management has ex Apartment is clean Apartment is free of any damages The windows have screens and shad All appliances are in proper working All plumbing fixtures are in proper a 	g condition
Date / / / Year	Signature of Landlord or Agent/Representative Delphi Properties, LLC 1203 Boylston on The Fenway, Suite 102 Boston, MA 02215-3350 Telephone: 617-437-7800 / Fax: 617-249-0557
Agreed and Assented by Lessee(s) below	
Lessee	Lessee
Lessee	Lessee