Apartment Condition Statement

Date: _____

PREPARED BY: ActionVest Management Corporation

This is a statement of the condition of the premises you have leased or rented. You should read it carefully in order to see if it is correct. If it is correct, you must sign it. This will show that you agree that the list is correct and complete. If it is not correct, you must attach a separate signed list of any damage which you believe exists in the premises. This statement must be returned to the lessor or his agent within fifteen (15) days after you receive this list or within fifteen (15) days after you move in, whichever is later. If you do not return this list within the specified time period, a court may later view your failure to return the list as your agreement that the list is complete and correct in any suit which you may bring to recover the security deposit.

TO: _____

Lessee

_____

Address

_____

City Zip

RE: _____

Unit

_____

Address

_____

City Zip

We have examined the premises and have found the present condition to be as follows:

Date:_____/_____/_____ Lessor/Agent Signature: _____

_____

Lessor

c/o ActionVest Management Corporation

Address

1667 Commonwealth Avenue MA Brighton

City Zip

(617) 783-8888

Phone

_____

Agent

ActionVest Management Corporation

Address

1667 Commonwealth Avenue MA Brighton

City Zip

(617) 783-8888

Phone

AGREED AND ASSENTED TO: _____ _____/_____/_____

Lessee

© 1978 GREATER BOSTON REAL ESTATE BOARD All rights reserved.
This form may not be copied or reproduced in whole or in part in any manner whatsoever.
without the prior express written consent of the Greater Boston Real Estate Board.
Form ID: RH161 PD: 07/05 This form was created by Eric Mason using e-FORMS. e-FORMS is copyright protected and may not be used by any other party.

e-FORMS EQUAL HOUSING OPPORTUNITY