

FINAL WALK THROUGH

Unit# _____ #BR _____

OWNER/MANAGER: Do Final Check after Cleaned and Repaired to confirm Ready for Occupancy

Property _____

Guest(s) _____

Address: _____

Name _____

Start	[] am	Target	[] am
Time:	[] pm	FinishBy:	[] pm

DAY _____ DATE _____

SERVICE REP NAME(S) _____

VISIT TYPE _____

BILLABLE TO: _____

		[] Guest Call [] Emergency [] Other _____		[] Owner [] Guest [] HPM	
√	BATHROOMS 1 2 3 4 5	Standards: (Checkmark=Clean/No Damage)	Repairs Needed: (Circle one)	Comments, Repairs, Damages	
	Bathtub/shower	Drains and valves work, no drips	Parts Adjust Replacement		
	Toilet/faucet/sink	No drips, runs, stains	Parts Adjust Replacement	Verify plunger, snake, pan under each sink	
	Fan/lights/electric	Fan clean, bulbs/switches work	Parts Adjust Replacement		
			Parts Adjust Replacement		

√	KITCHENS 1 2 3	Standards: (Checkmark=Clean/No Damage)	Repairs Needed: (Circle one)	Comments, Repairs, Damages	
	Stove, MW, Refrig	Appliances work inc. bulbs, trims	Parts Adjust Replacement	Replace baking soda in refrig annually	
	DW, Washer/Dryer	No leaks, steel-braid hoses only	Parts Adjust Replacement		
	Sink, faucet, dispos	No drips, no leaks, clear disposer	Parts Adjust Replacement	Verify plunger, snake, pan under each sink	
	Fan/lights/electric	Fan clean, bulbs/switches work	Parts Adjust Replacement		
			Parts Adjust Replacement		

√	BEDROOMS 1 2 3 4 5 6 7	Standards: (Checkmark=Clean/NoDamage)	Repairs Needed: (Circle one)	Comments, Repairs, Damages	
	Floor/wall/door	Clean carpet, lam, wood, paint	Parts Adjust Replacement		
	Fan/lights/electric	Fan clean, bulbs/switches work	Parts Adjust Replacement		
			Parts Adjust Replacement		

√	LIVING ROOM 1 2	Standards: (Checkmark=Clean/NoDamage)	Repairs Needed: (Circle one)	Comments, Repairs, Damages	
	Floor/wall/door	Clean carpet, lam, wood, paint	Parts Adjust Replacement		
	Fan/lights/electric	Fan clean, bulbs/switches work	Parts Adjust Replacement		
	HVAC Heat/Air	<input type="checkbox"/> PTAC wash filter <input type="checkbox"/> Central replace filter	Parts Adjust Replacement	(Filter size = x)	

KEYS: Tagged & In Plastic Pocket # of Sets OnHand _____ OneKeyFitsBoth Two Keys POBox ExtDoor Laundry Pool

GUEST INFO POCKET: Clear pocket placed on counter: Guest Info sheet Keys AddressLabels Yellow copy - Final Walk

GENERAL CONDITION of UNIT as you found it: Clean Fair Dirty Damaged Left Junk

NOTES: _____

Must turn in complete Timesheet with this Repairs Checklist. Must get advance permission for Overage hours and bill to Guest if unit abused or abandoned.

X Repair Signature: _____ PrintName: _____ Date: _____ Start Time: _____ End: _____ = ___ hrs
 X Repair Signature: _____ PrintName: _____ Date: _____ Start Time: _____ End: _____ = ___ hrs
 X Repair Signature: _____ PrintName: _____ Date: _____ Start Time: _____ End: _____ = ___ hrs

Problems? Extra Time Needed? Must get advance permission for Overage Hours from Robert 423-231-1266 Repairs Checklist.pub 7/2015rb
 Office Use: Received: _____ WorkOrder for Repairs: _____ KUB-PowerOn? _____ KeysMissintg? _____ MoveOut Scheduled in REA _____