

Room Condition Form

Student Name:

Room Number:



Check the room carefully for any damages - you will be charged for any damages/missing items

The purpose of this form is to protect both the student and the college as to damage charges and provide for maintenance corrections. Students will be assessed for damage or loss which occurs during their occupancy, as well as fines for extraordinary cleaning, furniture removal, etc. Each resident must verify room condition accuracy at both check in and check out. **Students not signing the report of either check-in or check-out forfeit their ability to appeal any charges.**

CHECK-IN VERIFICATION

I accept responsibility for the room and furnishings as listed. I understand that all items/areas are jointly shared by roommates. By signing this form, I acknowledge my responsibility for any damages.

Name (printed)

Signature

Date Time

Staff Signature Date

CHECK-OUT VERIFICATION

Signature

Date Time

Staff Signature Time

Room Key Returned: ☐ Yes ☐ No

CHECKOUT ITEMS	MAX COST	CHARGE
Improper Checkout	\$50	
Cleaning Fee	\$100	
Trash and/or Item Removal	\$50	
Furniture Not Back in Place	\$50	
Lost Key	\$50	
Total		

ITEMS	CHECK-IN CONDITION	CHECK-OUT CONDITION	MAX COST	CHARGE
Bed Frame			\$175	
Fridge			TBA	
Mattress			\$130	
Dresser/Drawer			\$500/ \$100	
Wardrobe			\$470	
Wardrobe Racks/ Mirror			\$150/ \$50	
Desk			\$215	
Desk Chair			\$190	
Lights			\$100	
Light Switch			\$20	
Thermostat			\$150	
Blinds			\$50	
Floor			\$75	
Walls			\$200	
Door			\$250	
Door Hardware			\$200	
Outlets			\$30	
Windows			\$350	
Window Hardware			\$40	
Smoke Detector			\$100	
Ceiling			\$200	

Are you OK with being on FGC's social media pages/website?: Yes/No

Notes:

ROOM CONDITION CODES

F Front **B** Back
L Left **R** Right
SC Scratch **HO** Holes
NC No Charge **MI** Missing
AD Adhesive/Tape Residue **BE** Bent
ST Stained **BR** Broken
LO Loose **PC** Paint Chip
NVD No Visible Damage

For office Use Only:

Room Damage:

Checkout Items:

Other:

Total: