**REHAB MAINTENANCE CHECKLIST**

**Gave to Vendor:** **\_\_\_\_\_/\_\_\_\_\_/****\_\_\_\_\_\_\_**

**Name:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address of Property:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Notes:

**Owners Last Name:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Accounting Balance: $****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Security Deposit Amount: $****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Video #****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Time:****\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SQFT** **\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Residential Move-in Date:** **\_\_\_\_\_\_\_/\_\_\_\_\_\_\_/****\_\_\_\_\_\_\_\_\_\_ Staff:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

New Resident Move-In Date (if Any):

 ****\_\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_**

**Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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