

MOVE-OUT PROCEDURES CHECKLIST

(Completed with each move-out and filed in tenant's move-out file)

Date of Notice: _____ Pre-Inspection Date: _____
Tenant: _____ Pass: _____ Fall: _____ Date: _____
Rank: _____ Final Inspection Date: _____
Address: _____ Pass: _____ Fall: _____ Date: _____
Contact #: _____ Move-Out Date: _____
 Early Termination: _____

_____ Generate a *Notice of Intent to Vacate* when notified in advance by the tenant of the upcoming vacancy. Check tenant's financial ledger for amounts owed as of date of notice, to include amount in *Notice of Intent to Vacate* (and early termination fee, if applicable).

_____ Obtain copy of orders, if applicable (Target Tenants only).

_____ Tenant completes *Exit Survey*.

_____ Remove resident from One Call Now system.

_____ Schedule a pre-inspection date within 5 days of receipt of Intent to vacate. Tenant must be present at this time.

_____ Provide tenant with *Move-Out Cleaning Checklist*.

_____ Conduct a pre-inspection of the unit with the tenant prior to move-out.

_____ Conduct a final inspection of the unit with the tenant present (if possible).

✓ Prior to conducting final inspection, obtain outstanding monies owed.

_____ Complete a *Statement of Unit Condition*. Compare the condition at move-out with the condition at move-in.

✓ Upon completion of final inspection, perform the Deposit Accounting (Yardl), include damages to outstanding balance and provide total due to tenant. Inform the tenant that the outstanding balance must be paid prior to clearance.

_____ Print a *Move-Out Statement* (Yardl) and send via certified mail, return receipt requested to tenant's forwarding address (or the last known address at the complex if no forwarding address was provided).

_____ Create a make-ready work order and give to maintenance on the date of final inspection.

_____ Notify maintenance of vacancy, and unit make-ready for occupancy.

_____ Have maintenance complete the *Unit Make-Ready* and the *Unit Make-Ready Time Reports*.

NOTICE OF INTENT TO VACATE

FOR OFFICE USE ONLY		DATE OF NOTICE: _____
RESIDENT: _____	ADDRESS: _____	
TOTAL RESIDENT CHARGES OWED AS OF DATE OF NOTICE: \$ _____		
FOR RENT: \$ _____	MAINTENANCE CHARGE(S): \$ _____	OTHER: \$ _____
Pre-Move Out Inspection: _____	Unit Type: _____	
Lease Expiration Date: _____	Transfer Date: _____	
Out Inspection: _____	Abandoned Date: _____	
<i>(If applicable)</i>		

On this date, I, _____, hereby give Hunt Military Communities notice of my intent to vacate the above referenced housing unit on the _____ day of _____, 20____, for the following reason(s):

- I have received permanent change of station orders. (Orders must be provided to Management.)
- I have received temporary duty orders for a period in excess of three (3) months. (Orders must be provided to Management.)
- Early Termination. I understand that I must comply with all early termination requirements outlined in the lease contract / addendum, otherwise the lease remains in effect for the full term, and I must pay all rent that comes due.
- Other: _____

I understand that:

- 1) I must comply with the 'Moving Out and Termination Procedures' outlined in the House Rules, Regulations, and Resident Guidelines;
- 2) The security deposit refund (if applicable) is subject to compliance with the terms and conditions of the Lease;
- 3) No change in the move-out date shall be made without prior approval from Management;
- 4) If there are multiple Residents on the Lease, written notice of termination from one will be considered notice from all;
- 5) Holding over and / or failing to move out on the above move-out date, subjects me to all contractual and statutory remedies for violation of the Lease Agreement, including damages, attorney fees, late payment charges, unpaid rent charges, etc.
- 6) As of this date, I owe charges for rent and / or other charges in the amount of \$ _____;
- 7) There may be additional rent and charges due which I will be responsible for prior to, or upon move-out and payable by money order or cashier's check only.

Resident	Date
Resident	Date
Hunt Military Communities Representative	Date

Forwarding Address: _____

Contact Telephone # () _____



EXIT SURVEY

Your opinion is important to us. Our goal is to improve the quality of family housing and services we provide to you and your family. Your answers to these survey questions will identify areas for continuous improvement. We encourage you to add comments at the end of the survey.

.....
 Please circle your response to questions 3 through 7 using the following scale:

1	2	3	4	5
Very Dissatisfied	Dissatisfied	Average	Satisfied	Very Satisfied

1. What is your reason for moving?
 Renting a home PCS TDY EAS Deployment
 Purchasing a house Retirement Other: _____
2. If you have purchased a house, will your monthly payment be lower than your current rental payment?
 Yes No
3. How would you rate the overall quality of your residence? 1 2 3 4 5
4. How would you rate the maintenance quality? 1 2 3 4 5
5. How would you rate the overall management of the community? 1 2 3 4 5
6. How would you rate the overall rents and utilities of the community? 1 2 3 4 5
7. How would you rate the overall quality of the community compared to private sector housing in this area? 1 2 3 4 5
8. What rent amount (if any) would have kept you at our housing community? \$ _____ / month
9. Would you move into this privatized family housing community again? Yes No
10. Rank: E1-E6 E7-E9 Officer Other: _____

Additional Comments: _____

.....
 Name: _____ Date: _____
 Address: _____ Phone No. _____
 Email: _____

Hunt Military Communities would like to thank you for taking the time to complete this survey!

Buckley Family Housing Allotment Agreement

I, _____, agree that I will not stop my rent allotment to Buckley Family Housing until the first of the month following the date of my move out.

I further understand:

- I can stop my rent allotment on or after, _____, as long as I have fulfilled my lease terms, vacated the unit, and turned in keys to Management.
- My rent is paid in arrears.
- My final allotment payment will be applied to any outstanding damage and cleaning fees, then applied toward my rent.
- If I am due a refund, it will be mailed to the forwarding address that I have provided.

By signing below, you indicate that you understand and agree to all of the above statements.

Resident

Date

Resident

Date

Management

Date

Buckley Family Housing

Move-Out Procedures

Normal wear and tear is defined as deterioration to the Leased Premises that results from the intended use of the Leased Premises, including breakage or malfunction due to age or deteriorated condition, but it does NOT include deterioration that results from negligence, carelessness, accident or abuse of the Leased Premises by Tenant or a member of Tenant's household or by a guest of Tenant.

- All personal property must be removed from the unit prior to the final inspection.
- A carpet cleaning fee of \$200 will be assessed and is due at the time of move-out.
- A \$35 cleaning fee will be assessed unless the home has been contractually cleaned and the fee is waived by Community or Maintenance Director.

Bathrooms:

- Bathtubs, sinks, toilet, counters, mirrors, medicine cabinet shelves, shelf holders, cabinetry, towel racks, toilet paper holders, floor, exhaust fans and bathroom tile must be clean of soap, film, dust, dirt and marks.
- All towel racks and toilet paper holders must be in the same condition as they were received per the move in checklist.

Kitchen:

- All appliances must be pulled out and swept and mopped behind.
- All food particles, grease spots, water marks and carbon must be removed from all surfaces including the sides and top of all appliances including microwave and dishwasher. Dust and lint must be removed from all surfaces. Burner grates should be placed inside oven prior to running the self-clean cycle. All remaining dust/dirt/grime must be removed with dry steel wool.
- Sinks and countertops will be cleaned and all marks removed, all water or soap buildup will be removed around sink fixtures.
- All cabinetry including drawers, doors, shelves and pantry must be clean and free of food, debris, grease, etc. inside and out.
- Floor must be swept and mopped.

Living Room/Family Room/ Bedroom/Dining Room:

- All light fixtures and ceiling fans must be clean and free of dust and debris.
- Remove cobwebs from corners of ceilings, patio and porch, inside and outside of window sills.
- All air vents must be clean and free of dust and debris.
- Clean all outlets and switch plate covers.
- All windows, inside and out, must be cleaned where accessible.
- All blinds must be clean and free of dust and debris.
- Window sills must be cleaned.
- All closet shelves must be cleaned and free of dirt, dust and debris.
- All floors must be vacuumed or swept and mopped and free of pet hair. Make sure that baseboards and corners are vacuumed thoroughly.

Garage/Exterior areas:

- Garage must be swept and free of any grease or oil stains.
- Porches and patios must be clean and free of grease, oil stains and cobwebs.
- Grass and mulch/rock areas will be free of trash, cigarette butts, fecal matter, toys and leashes/tie outs.
- All clips, nails, hangers and plant hooks must be removed.

Painting:

- All nails, tacks, tape, ceiling hooks, stickers and accents must be removed.
- All small holes must be filled and painted to match original surface. If it does not match, repair will be made by Buckley Family Housing maintenance at the resident's expense.
- Large holes will be fixed by Buckley Family Housing maintenance at the resident's expense.
- All baseboards, corners, handrails, doors, door jambs, window sills, walls, shelving and ceilings must be cleaned and painted to original move in condition as noted on the move in checklist.
- Paint can be obtained from the Buckley Family Housing Self-Help store located at the maintenance shop.

Final Inspection:

- The unit must be ready for the next occupant at the time of the Final Inspection.
- All personal property must be out of the home at the time of the Final Inspection.
- All keys and garage door remotes must be turned in.
- Forwarding address and phone number must be listed on the Notice to vacate packet.
- If any damages exist beyond normal wear and tear, the resident must render payment upon completion of the Final Inspection.

I understand that my home must be cleaned and painted in accordance with the above standards at the time of my move out.

Resident- Move in Signature/Date

Resident-Notice to Vacate Signature/Date

Buckley Family Housing Representative/Date

Buckley Family Housing Representative/Date

MOVE-OUT CLEANING CHECKLIST

KITCHEN

- Stove top thoroughly, especially around the burners
- Stove grates
- Inside oven leaving no residue
- Oven racks
- Stove Drawer
- Control panel area on back of stove
- Vent hood, to include grease filter
- Refrigerator, inside and out
- Refrigerator shelves, drawers, and bins including ice bin
- Refrigerator seals and handles
- Remove air vent at bottom of fridge and clean
- Cabinets, inside and out
- Windows, inside and out
- Window tracks
- Dust blinds
- Strip and wax kitchen floor

DINING ROOM

- All light globes taken down, cleaned, and replaced
- Replace any burned out bulbs (60 watt only)
- Windows inside and out
- Strip and wax floor, unless carpeted
- Dust blinds
- Window tracks

LIVING ROOM

- Top of ceiling fan and all blades
- All light globes taken down, cleaned, and replaced
- Replace any burned out bulbs (60 watt only)
- Windows inside and outside of both (apartment)
- Windows inside and outside of the slider only (townhouse)
- Both sides of sliding glass door
- Window tracks
- Dust blinds
- Strip and wax entryway

BEDROOMS

- Top of ceiling fan and all blades
- All light globes taken down, cleaned, and replaced
- Replace any burned out bulbs (60 watt only)
- Window tracks
- Windows inside and outside of the slider only (townhouse)
- Dust blinds

BATHROOMS

- Tub and surrounding tub
- Commode
- Mirrors
- Sinks
- Strip and wax floors
- Shine all chrome
- All light globes taken down, cleaned and replaced
- Replace any burned out bulbs (60 watt only)
- Vanity
- Medicine cabinet
- Windows inside and outside of the slider only
- Both sides of sliding glass door
- Window tracks
- Dust blinds

FLOORING

- All carpet cleaned

Resident's Name: _____

Address: _____

Maintenance Member Conducting Inspection: _____

Move-Out Worksheet

This worksheet is to be used to itemize charges for items other than normal wear and tear at the Resident's Final Move-Out Inspection.

Issued Items:		Qty	Cost
<input type="checkbox"/> Door Keys	(Cylinders must be replaced if any key is not returned.)		\$20.00
<input type="checkbox"/> Mail Keys	(Lock Replacement)		\$10.00
<input type="checkbox"/> Garage Door Opener (Each)			\$25.00
			Subtotal

Painting:			
<input type="checkbox"/> Full Paint	(Up to 2 coats)		\$400 to \$550
<input type="checkbox"/> Ceiling Paint	(1 coat)		\$100 to \$160
<input type="checkbox"/> Medium Touch Up (1-3 hours)			\$250 to \$310
<input type="checkbox"/> Hole Patch Repair	Cost determined by size		No less than \$25
			Subtotal

Cleaning:				
Kitchen				
<input type="checkbox"/> Full Clean			\$145 to \$205	
<input type="checkbox"/> Light Touch Up Clean	REQUIRED		\$35	1 35.00
<input type="checkbox"/> Exterior Clean	Per item		\$25	
<input type="checkbox"/> Microwave			\$15	
<input type="checkbox"/> Range			\$100	
<input type="checkbox"/> Refrigerator			\$50	
<input type="checkbox"/> Dishwasher	Grates, shelves, etc		\$25	
<input type="checkbox"/> Sweep under range			\$15	
<input type="checkbox"/> Sweep under fridge			\$15	
<input type="checkbox"/> Cabinets, drawers, shelves			\$25	
<input type="checkbox"/> Counter tops			\$15	
<input type="checkbox"/> Floor	Swept and mopped		\$25	
<input type="checkbox"/> Other: Please list				
<input type="checkbox"/>				
Bathrooms				
<input type="checkbox"/> Sink			\$10	
<input type="checkbox"/> Toilet			\$10	
<input type="checkbox"/> Bathtub			\$25	
<input type="checkbox"/> Shower Stall			\$25	
<input type="checkbox"/> Mirrors			\$10	
<input type="checkbox"/> Med Cabinet			\$10	
<input type="checkbox"/> Cabinets, drawers, shelves			\$25	
<input type="checkbox"/> Floor	Swept and mopped		\$25	
House				
<input type="checkbox"/> All Windows			\$50	
<input type="checkbox"/> All ceiling fans			\$50	
<input type="checkbox"/> Doors			\$50	
<input type="checkbox"/> Carpet Vacuumed			\$50	
<input type="checkbox"/> Baseboards			\$100	
<input type="checkbox"/> Heating Vents			\$25	
<input type="checkbox"/> Garage clean			\$25	

Resident's Name: _____

Address: _____

Maintenance Member Conducting Inspection: _____

Exterior				
<input type="checkbox"/>	Sweep patios		\$25	
<input type="checkbox"/>	Yard free of trash		\$25	
<input type="checkbox"/>	Garage Clean		\$25	
<input type="checkbox"/>	Pet Waste		\$100	

Flooring				
<input type="checkbox"/>	Full Carpet Cleaning	REQUIRED	\$200	1
<input type="checkbox"/>	Vinyl Replacement	Must replace entire room	Actual cost	
<input type="checkbox"/>	Tile Replacement	Based on Actual	Actual cost	
<input type="checkbox"/>	Wood floor	Based on actual	Actual cost	
<input type="checkbox"/>	Full carpet replacement	Based on Actual	Actual Cost	
<input type="checkbox"/>	Partial replacement	Based on Actual	Actual Cost	
<input type="checkbox"/>	Floor Seal	Based on Sq Yard	Actual Cost	
<input type="checkbox"/>	Odor Treatment		\$100	
<input type="checkbox"/>	Stains	Per stain	\$25	

Miscellaneous Items				
<input type="checkbox"/>	Microwave Rack		\$20	
<input type="checkbox"/>	Blinds	Depending on size of blind	\$10 to \$200	
<input type="checkbox"/>	Light Fixtures		\$25 to \$85	
<input type="checkbox"/>	Towel Bars		\$20 to \$25	
<input type="checkbox"/>	Shower Rods		\$15 to \$35	
<input type="checkbox"/>	Thermostat		\$75	
<input type="checkbox"/>	Screens		\$10 to \$25	
<input type="checkbox"/>	Trash Receptacle Replace		\$80	
<input type="checkbox"/>	Trash Receptacle Clean		\$30	
<input type="checkbox"/>	Trash Removal	Per load	\$40	
<input type="checkbox"/>	Other			
<input type="checkbox"/>	Other			
<input type="checkbox"/>				

For Office Use	
Restoration	
Rent	
Other Charges	
Total	
Amount Paid	
Allotment	
Balance Due	

Verified that allotment is still in place? Y or N and Representatives initial_____

Resident's Signature / Date

Forwarding Address:

Resident's Contact Phone:

By signing, the resident agrees to make payment to Buckley Family Housing for the damages or cleaning costs assessed. Payment is due upon completion of the Final Inspection.