



Addendum to Move-in Exceptions Report

Resident: _____ Move-In Date: _____

Address: _____

This addendum must be returned to our office within **72 hours of moving – in.**

Walls/Ceiling: _____

Floor covering: _____

Doors/Closets: _____

Lighting: _____

Windows/Screens/Blinds: _____

Heaters/Vents: _____

Fireplace: _____

Cabinets/Counters: _____

Appliances: _____

Sinks/Toilets: _____

Towel Bars/TP Holders: _____

Balcony/Deck/Patio: _____

This is an addendum to your original lease noting any items that are above and beyond normal wear and tear that were not documented on the original move-in exceptions report.

Resident: _____

Manager: _____

Date added to file: _____

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