

CALLONWOOD CLUBHOUSE CHECKLIST

Renter Initials <u>IN / OUT</u>	Scheduler Initials <u>IN / OUT</u>	
/	_/_	Refrigerator empty and wiped clean
/	_/_	Microwave wiped clean
/	_/_	Coffee pot cleaned and put away
/	_/_	Kitchen cabinets, counter tops and sink wiped clean
/	_/_	Bathrooms clean, no trash on floor, all trash receptacles emptied (large and small)
/	_/_	Garbage removed to outdoor containers
/	_/_	Tables cleaned and returned to storage room (9)
/	_/_	Chairs stacked on rack and returned to its indoor location (64)
/	_/_	Furniture returned to its original location
/	_/_	Floors swept and mopped, if needed
/	_/_	Remove all food items, decorations & personal effects
/	_/_	Condition of walls and television will be examined

CHECK-IN

The clubhouse committee member has walked me through the clubhouse for an inspection tour and to include what items are available and what is expected to be done at the end of my event. The signature below and initials after each item above, acknowledges that I will abide by the rules.

Resident: _____ Date _____

Committee member: _____ Date _____

CHECK-OUT

_____ Violations noted

_____ No violations noted

Resident: _____ Date _____

Committee member: _____ Date _____