

## Move Out Instructions and Standard Charges

#### **INSPECTIONS**

Appointments for inspection are made by notifying the Westgate Office at least 24 hours in advance. You may choose to schedule your inspection as much as 30 days in advance to ensure the date and time you prefer.

Inspections are scheduled Monday through Friday from 9:30 A.M. to 4:30 P.M. Inspections are not accepted for scheduling on Saturdays, Sundays, Company, or Legal Holidays.

All of the resident's furniture and personal belongings must be removed from the apartments and the required cleaning done before inspections are made. Resident should be present for the inspection. Please check in at the Westgate Office at scheduled inspection time.

#### KEYS/LAUNDRY CARD/CAR TAG/POOL TAGS

Keys are to be returned to the Westgate Office after the inspection or given to the inspector. If keys/laundry card/car tag/pool tags are not returned, the following charges apply:

\$ 25.00/each	Apartment Key
\$ 50.00/each	Common Hallway Quad Key
\$200.00	Change Locks – No Apartment Keys returned
\$ 10.00/each	Laundry card/Car Tag/Pool Tag

All keys are to be turned into the Westgate Office, do not leave keys in the vacated apartment.

#### SECURITY DEPOSIT

An itemized accounting of any deductions will be hand-delivered, mailed to Resident, at Resident's last known address, or emailed to Resident, no later than 30 days after surrender except where otherwise provided by statute.

#### <u>UTILITIES</u>

The resident is responsible for all utilities, as agreed in the lease, from the first day of the lease through and including the last day of the lease liability. Power is to be left on in the apartment for the inspection. Places you may need to notify of your relocation include:

Electric and Gas - Ameren IL (800) 755-5000

Telephone - AT&T (800) 244-4444

Cable – Xfinity/Comcast (217) 384-2500

Post Office - (217) 373-6023

### **CLEANING**

The following lists cleaning that is required to be completed prior to the final inspection, as well as the charges that will be assigned if the requirements are not adequately met. Any work that is not itemized on this sheet will be done at an hourly rate of \$75.00 plus cost of materials with an hour minimum. These costs are subject to change without notice.

	Required Cleaning:		Minimum Charges	
А	Floors: washed, vacuumed and/or shampooed	i.	Vacuum floors	\$20.00/Room
		ii.	Shampoo carpet	\$120-\$240/Unit
В	Clean Bathroom - Walls, bathtub, toilet, grouting, tile-shower surround, fixtures,	i.	Wash Bathroom Walls	\$30.00
	vanity and mirror/ medicine cabinet	ii.	Clean Fixtures, Mirror/Medicine Cabinet	\$15.00 each
		iii.	Clean Grouting, Tile- Shower Surround	\$40.00
		iv.	Clean Bathtub, Toilet	\$40.00 each
		v.	Clean Vanity, Sink	\$20.00 each
С	Wash kitchen cabinets inside and out, Remove all shelf paper, Wash countertops	i.	Wash kitchen cabinets	\$45.00
		ii.	Clean kitchen countertops	\$15.00
D	Clean stove to include top, sides, front, drip pans, beneath drip pans, burners, racks	i.	Clean inside oven completely	\$60.00
	(top and bottom), kick panel, and oven	ii.	Clean stove~ top, sides, front	\$45.00
		iii.	Clean drip pans	\$35.00
Е	Clean Refrigerator - wipe out interior and exterior of refrigerator	i.	Clean refrigerator completely	\$80.00
F	Clean kitchen sink and all fixtures	i.	Clean kitchen sink and fixtures	\$15.00 each
G	All walls and baseboards are to be clean		Wash down all walls and baseboards	\$25.00/room
Н	Wash closet walls, shelf, racks, and baseboards		Clean closet completely	\$20.00 each
Ι	Wash windows and blinds	i.	Wash windows & blinds	\$25.00 each
J	Remove all trash. Any large items such as furniture, bicycles, etc. Must be	i.	Carry out trash	20.00/bag
	removed entirely from premises prior to inspection	ii.	Remove large items	\$75.00/item
		iii.	TV Removal	\$80.00/TV
Κ	Pest Control Treatment of apartment (if applicable)	i.	Defleaing/Bedu Bud (per treatment)	Actual Cost
L	Deodorizing Carpet	i.	Deodorizing	\$200.00
Μ	Missing Fire Extinguisher	i.	Missing Fire Extinguisher	\$60.00
Ν	Apartment Entry Door/Interior Doors/Closet Doors	i.	Replace/Damaged	Actual Cost

# RESIDENT HEREBY ACKNOWLEDGES RECEIPT OF A COPY OF MOVE-OUT INSTRUCTIONS AND STANDARD CHARGES.

### **Resident (Jointly and Severally):**

 Resident
 Date

 Resident
 Date

 Resident
 Date

 Resident
 Date

Its Authorized Agent

Date