

Lease Holder Name: _____
 Current Address: _____
 Home Phone: _____ Work Phone: _____ Cell Phone: _____
 Emergency Contact Phone: _____ Email Address: _____ @ _____
 Forwarding Address: _____ State _____ Zip _____
 Reason for Moving: _____ (PCS, Relocation, EAS, Retirement, etc.) PCS Destination: _____

Are you interested in earning money with Hunt's Resident Loyalty Program? YES, No, Thank you

Orders Received: Circle: [YES] or [NO] Date Received: _____ Received by (OFFICE USE): _____
 Move-Out Date: _____ Date Submitted (OFFICE USE): _____

Move-Out Terms & Conditions

_____ A Final Inspection appointment will be conducted once the home is vacated. The community representative will submit a final inspection form and a cost estimate of damages to the resident at the time of the move-out inspection. Additional damages may be accessed after move-out in accordance with the Lease Agreement. Residents will be required to pay for damages directly to the Community at the time of move-out. All damages must be paid for with certified funds, mac allotment, or credit or debit card on the date of move out.

_____ I have received a copy of the move out procedures and cost estimate list. I understand the condition the home must be in when possession is returned to Management.

_____ Resident acknowledges that the move-out date is a definite date. A request for a cancellation or extension of this Notice to Vacate must be made in writing for consideration. If the home is leased to another resident, it may not be possible to move the final inspection appointment. If it is approved to move the final inspection appointment, it will be scheduled on the next available appointment which may be one or more business days beyond the original appointment. **If the home is not vacated on the move-out date specified above, the Resident is liable for damages, cleaning and rent up to and including the actual move-out date in addition to a one-time missed appointment fee of \$50.** This notice does not release the Resident of any liability under the Lease Agreement.

_____ I understand if I choose to have my allotment stopped prior to vacating my home, I must pay any outstanding monies via certified funds to include damages owed by the first (1) of the month I plan to vacate.

_____ I am required to give written notice to vacate per the terms in my Lease Agreement. If not described in the termination section of the lease agreement as a reason for early termination, I am subject to any rents and/or fees associated as described in the Lease Agreement. I will provide documentation to support my reason for early termination.

_____ I understand that if I am retiring or separating from the military the same month I am vacating; my allotment will not be taken. Therefore, I will be required to pay manually for my last month's rent with certified funds one month in advance.

_____ A rent refund, if applicable, will be returned by check, mailed to the forwarding address shown above and following all state and local laws. The check will be addressed to the Resident named on the Resident Lease Agreement.

_____ I waive my rights under the Privacy Act and authorize any government agency or agent to release my home forwarding address, email and phone for the purpose of collecting an unpaid debt or damages to a dwelling caused by me, a member of my family or guest while I was a resident.

_____ I grant authorization to share my contact information with other PPV partners for the purposes of assistance in housing relocation.

_____ I understand that if I have not provided the required written notice to vacate in accordance with my lease terms, I will be held financially rent responsible until the end of the required notice period or until the home is occupied, whichever comes first.

_____ I understand that I am breaking my lease agreement, and I owe the lease break fee listed at the bottom of this form.

_____ I understand and have read the transfer policy and agree to the maintenance recovery fee.

I (we) have read the above move-out terms and understand and agree to the terms, in addition to the lease agreement.

Pre-Inspection Date: _____ Final Inspection Date: _____

Rent Responsible Date: _____ Early Termination Fee: _____

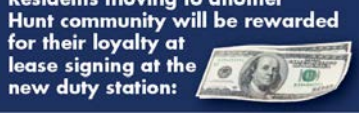
Maintenance Recovery Fee: _____ Move and Go Fee: _____

Prorate/Other: _____ Estimated Utility Payment: _____

TOTAL ESTIMATE: _____

The above charges are not inclusive of any of potential damage fees or other fees that may be incurred between the notice to vacate submission and the actual move-out date.

Resident Signature: _____ Print Name: _____ Date: _____



- \$100 credit to the resident ledger at the new duty station
- Or \$200 credit off of the first month's rent at your new duty station if you sign your lease in advance*

FOR OFFICE USE ONLY
 Received by: _____ Date Received: _____



*As stated in the Resident Guidelines, upon vacating it is the resident's obligation to leave the home in the same high standard of cleanliness and repair that it was received. This checklist is not all inclusive.

GENERAL AREA

1. Walls should be clear of foreign objects, i.e. nails, stickers, wallpaper, borders, dirt, etc.
2. If walls were painted by resident, they must be primed (white) so color does not show through and can be covered with only one (1) coat of paint by Bolling Family Housing
3. Carpeting should be vacuumed and free of stains and pet hair
4. Blinds and window sills should be wiped down and blinds not bent or broken
5. All screens and windows must be intact
6. Dust and clean all light fixtures/ ceiling fans, ensure all light bulbs are replaced/ working
7. Tile and wood floors must be broom swept and damp mopped. Black scuff marks must be removed from floors and baseboards
8. All areas must be free of debris and personal belongings

KITCHEN AREA

1. Refrigerator/ Freezer should be defrosted, cleaned inside and out and turned on low. Clean behind and underneath refrigerator
2. Ice maker should be empty and in the off position
3. Range and over (inside and out), broiler pans, all racks and underneath must be cleaned
4. Hood and exhaust fan should be cleaned, ensure grease is cleaned from underside of hood
5. Dishwasher is to be clear of food particles inside and out
6. Wipe down all cabinets, countertops and pantry racks. Ensure inside of cabinets are free of debris
7. Microwave must be clean inside and out and rack should be in place

BATHROOM AREA

1. Tub, sink and toilets must be cleaned and free of mildew and soap scum
2. Floors should be swept and damp mopped
3. Wipe down vanity and medicine chest(s)
4. Clean mirrors

GARAGE, CARPORT, PORCHES, STORAGE ROOMS AND PATIOS

1. Remove all dirt, cobwebs, bird's nests, etc. from exterior doors, garages and ceilings
2. Repair damage to lawn caused by pets, sheds and removal of fencing (this includes filling in any holes and reseeding dead areas of the lawn). Remove all pet feces.
3. Remove all trash from property (a roll off dumpster is available at the maintenance shop from 7:30am to 7:30pm Monday through Friday). Any trash left behind will be billed to the resident by the bag at \$20.00 per bag or \$100 per piece of furniture
4. Trash and Recycle Cans must be empty, cleaned and pulled back against home

SPONSOR'S SIGNATURE

DATE



DAMAGE AND CLEANING CHARGES AT MOVE-OUT

DAMAGE CHARGES / REPLACEMENT

Any and all damages and replacement will be charged to the resident at the actual replacement costs. Labor costs can be charged at a rate of \$30/hour. Replacement of all flooring is charged at a seven (7) year prorated amount.

A. EXTERIOR – LAWN, GARAGE, PATIO, OUTSIDE STORAGE ROOM, TRASH REMOVAL

| | |
|-------------------|-----------------------|
| Trash Removal | up to \$20.00 per bag |
| Mow Yard | up to \$100 |
| Turf Restoration | up to invoice cost |
| Garage Door Panel | up to invoice cost |
| Furniture Removal | up to \$100/piece |

B. KEYS & LOCKS

| | |
|------------------------------------|---------------------------|
| Garage Door Opener | \$75 per opener |
| Garage T-lock Handle | replacement cost |
| Door Key | \$25 per key |
| Mailbox Key | \$25 per key |
| Lock Change/Replacement | up to \$250 per lock |
| After-hour Lock Change/Replacement | additional \$100 per lock |

C. CLEANING SERVICES

| | |
|---------------------|----------------------|
| Whole Unit Cleaning | actual invoice cost* |
| Extra Cleaning | actual invoice cost* |
| Oven | \$25.00 |
| Range top | \$25.00 |
| Vent hood | \$10.00 |
| Refrigerator | \$25.00 |
| Freezer | \$10.00 |
| Vinyl Floors | \$50.00 ea. room |
| Counters | \$10.00 ea. |
| Kitchen Cabinets | \$5.00 ea. |
| Light Fixtures | \$2.00 ea. |

| | |
|---|---------------------------|
| Dishwasher | \$10.00 |
| Patio/Balcony | \$30.00 |
| Bathtub and Tile | \$30.00 ea. |
| Bathroom Sink | \$5.00 ea. |
| Toilet | \$15.00 ea. |
| Bath Cabinet | \$5.00 ea. |
| Mirrors | \$5.00 ea. |
| Carpet Stains beyond Normal Wear and Tear, Carpet Dye | actual invoice costs* |
| Trash | up to \$20.00 per bag |
| Pet Waste removal | billed at \$30/hour rate* |
| Whole Unit Paint | actual invoice cost* |
| Extra Painting per Room | actual invoice cost* |
| Smoke Damage & Odor Elimination | actual invoice cost* |
| Pet Treatment | actual invoice cost* |

**If management team provides the repair/replacement, the cost is billed at \$30/hour rate.*

REPLACEMENT CHARGES

All replacement costs will be charged based on the cost of actual replacement. Carpet is pro-rated based on seven (7) years and vinyl is pro-rated based on twelve (12) years. Additional paint charges, carpet stains, resurface of tubs or countertops will be charged based on actual cost. Damages to garages will vary and be based on actual replacement/repair costs. Hourly rates listed do not include any additional cost for materials.

Any replacement/repair not on this list will be priced at the time of service. Prices are subject to change in accordance with the change procedure given in the section on Community Policies Enforcement. Excessive damage may alter above prices.

NOTHING HEREIN WILL BE CONSTRUED AS A LIMITATION ON MANAGEMENT'S RIGHT TO PURSUE RESIDENT FOR DAMAGES NOT SPECIFICALLY LISTED HEREIN.

Resident Signature: _____

Date: _____



CLEAN AND GO

Residents wishing to take advantage of our Clean and Go service can enjoy the benefits of a professional cleaning service that will allow you to clear housing and enjoy free time with your family. The Clean and Go service pricing is listed below. The amount for the requested service is due to Bolling Family Housing via money order immediately following the final inspection when any abnormal wear and tear on the home is assessed with the service member.

| | 3BR | 4BR | 5BR |
|-----------------------|------------|------------|------------|
| Standard clean | \$200 | \$250 | \$250 |
| Heavy clean* | \$350 | \$400 | \$400 |

*Units will require a heavy clean if they meet at least one of the following criteria:

1. The resident has (or had) pets in the home, which requires the unit cleaned and treated for pet hair and odor.
2. The resident has severely soiled the kitchen appliances, such as the oven cook top/underneath the cook top, and inside of the oven. Severely soiled refrigerators, dishwashers and microwaves will also qualify.
3. The resident has severely soiled the bathrooms, to include heavy mildew and soap scum on shower walls. Also extends to soiled toilets, cabinets and vanity drawers.
4. The resident has excessive crayon or pencil marks on the walls, doors, door trim and/or baseboards.

CARPET SHAMPOO

Residents who wish to only have their carpets shampooed as part of the package can do so at an additional cost, or independently of a package. **Note:** Units which have been occupied by pets must be treated for pet odor/hair. Carpet may not be cleaned if the damage is beyond cleaning and replacement is recommended.

| | 3BR | 4BR | 5BR |
|------------------------|------------|------------|------------|
| Pet-free units | \$150 | \$200 | \$200 |
| Units with pets | \$225 | \$275 | \$275 |

FLOWER BEDS

Residents who wish to have the weeds in their flower beds pulled as a part of the package can do so at an additional cost, or independently of a package.

| | Flower Beds | Mow Fenced Yard | All flower beds |
|-------------|--------------------|------------------------|------------------------|
| Cost | \$60 | \$75 | \$125 |

I, _____, am opting to pay to have my home cleaned for me to clear housing, as opposed to cleaning it myself. I acknowledge that there will be a final inspection to check for damages prior to the cleaning and the total below will be due via money order at that time.

\$ _____ (Charge total)

Service Member: _____

Date: _____

Hunt Representative: _____

Date: _____