

Tikva Rental Housing Society
 Suite 104 – 1177 West Broadway
 Vancouver, BC V6H 1G3

Amenity Room Rental Checklist - Dogwood Gardens - 603 West 59th Avenue

Purpose: To ensure the Amenity Room facilities are left in the best condition to pass along to the next resident room renter.

Policy: The tenant will fill out the following checklist prior to and following the rental. **All tasks must be completed, or a \$60 per hour rate may be charged to the room renter.** The number of hours of cleaning necessary will be determined by Tikva Housing staff.

| | Condition and Inventory Prior to Rental | Condition Following Rental |
|--|---|----------------------------|
| Number of Folding Chairs: ____ (48) Number of Bar stools: ____ (4) Number of Lounge Chairs: ____ (6) | <input type="checkbox"/> Clean & Folded | |
| Number of 60" Round Tables: ____ (6) Number of 48" Round Tables: ____ (4) Number of 6' Long Tables: ____ (12) Number of Side Tables: ____ (4) | <input type="checkbox"/> Clean & Folded | |
| Floors | <input type="checkbox"/> Free of debris: swept, mopped & vacuumed | |
| Walls/Ceilings/Windows (Please do not use tape) | <input type="checkbox"/> Clean and free of decorations | |
| Washroom | <input type="checkbox"/> Clean, no residue on floors, sink & toilet | |
| Kitchen Inventory | <input type="checkbox"/> Fridge <input type="checkbox"/> Microwave <input type="checkbox"/> Stove/Oven <input type="checkbox"/> Kettle <input type="checkbox"/> Dishwasher <input type="checkbox"/> Coffee Maker <input type="checkbox"/> Range <input type="checkbox"/> Toaster Oven <input type="checkbox"/> Other: _____ | |
| Kitchen Clean | <input type="checkbox"/> All surfaces are clean & free of residue <input type="checkbox"/> All appliances are cleaned, including fridge and dishwasher interior | |
| Garbage & Recycling | <input type="checkbox"/> Remove garbage, new garbage bag replaced (2 in the kitchen and 1 in the bathroom) <input type="checkbox"/> Recycling bin emptied | |
| Upon Departure | <input type="checkbox"/> Room locked & doors and windows closed | |
| Notes – room condition prior to rental: | | |
| Notes – room condition after rental: | | |

Fob # _____ Key Returned on _____

 Signature of Resident

 Unit #

 Date