

Apartment Address:

---

---

As a new roommate, I accept the condition of the apartment "as-is" upon my move-in. I understand The Byron Company will do no inspection of the apartment or its condition prior to my occupancy. I understand and accept that The Byron Company will charge for any damages and cleaning upon my move-out, which will be deducted from my deposit. I further accept and understand that this damage and/or lack of cleaning may have occurred before my occupancy.

Name (Print): \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature: \_\_\_\_\_