

**DAMAGE DEPOSIT AGREEMENT
MOVE IN/OUT**

24535 OWNERS CORP.
c/o Alexander Wolf & Company, Inc.
One Dupont Street
Plainview, NY 11803

RE: Apartment : _____

I/We have been advised that the Board of Directors of 24535 Owners Corp. requires the deposit of \$250 by certified or bank check, to be paid by each party for the move-in and move-out respectively, to indemnify the corporation against any loss which may be sustained resulting from damage to the building or its property in connection with my/our move.

It is understood that I am to arrange an inspection of the premises by the superintendent of the building immediately after the completion of my move and if damage has occurred, I agree that the cost of repairs will be deducted from my deposit and the balance, if any, shall be refunded to me/us within 14 days of my returning this completed form. If there is no damage, the deposit will be refunded in full. If there is damage which exceeds \$250, I/we will pay the amount of all additional damages within ten (10) days of receipt of notification by the corporation of the amount due.

In order to secure my/our refund, if any, a copy of this form and the attached elevator inspection form signed by the superintendent, must be returned to the office of the Managing Agent by the party moving.

Note also that there is absolutely no move into or out of the building after 5PM Monday-Friday, and absolutely no moves can occur Saturdays or Sundays. Anyone who appears at the building after 5PM will be turned away

Very truly yours,

MOVING PARTY

MOVING PARTY

Date: _____

New address: _____

NOTE: THE MANAGING AGENT MAY NOT REFUND THE DAMAGE DEPOSIT TO ANY PARTY UNTIL BOTH THE DAMAGE DEPOSIT AGREEMENT AND ELEVATOR INSPECTION FORM COMPLETED BY THE SUPERINTENDENT AND RETURNED TO THE OFFICE OF THE MANAGING AGENT BY THE SHAREHOLDER OR SUBTENANT.

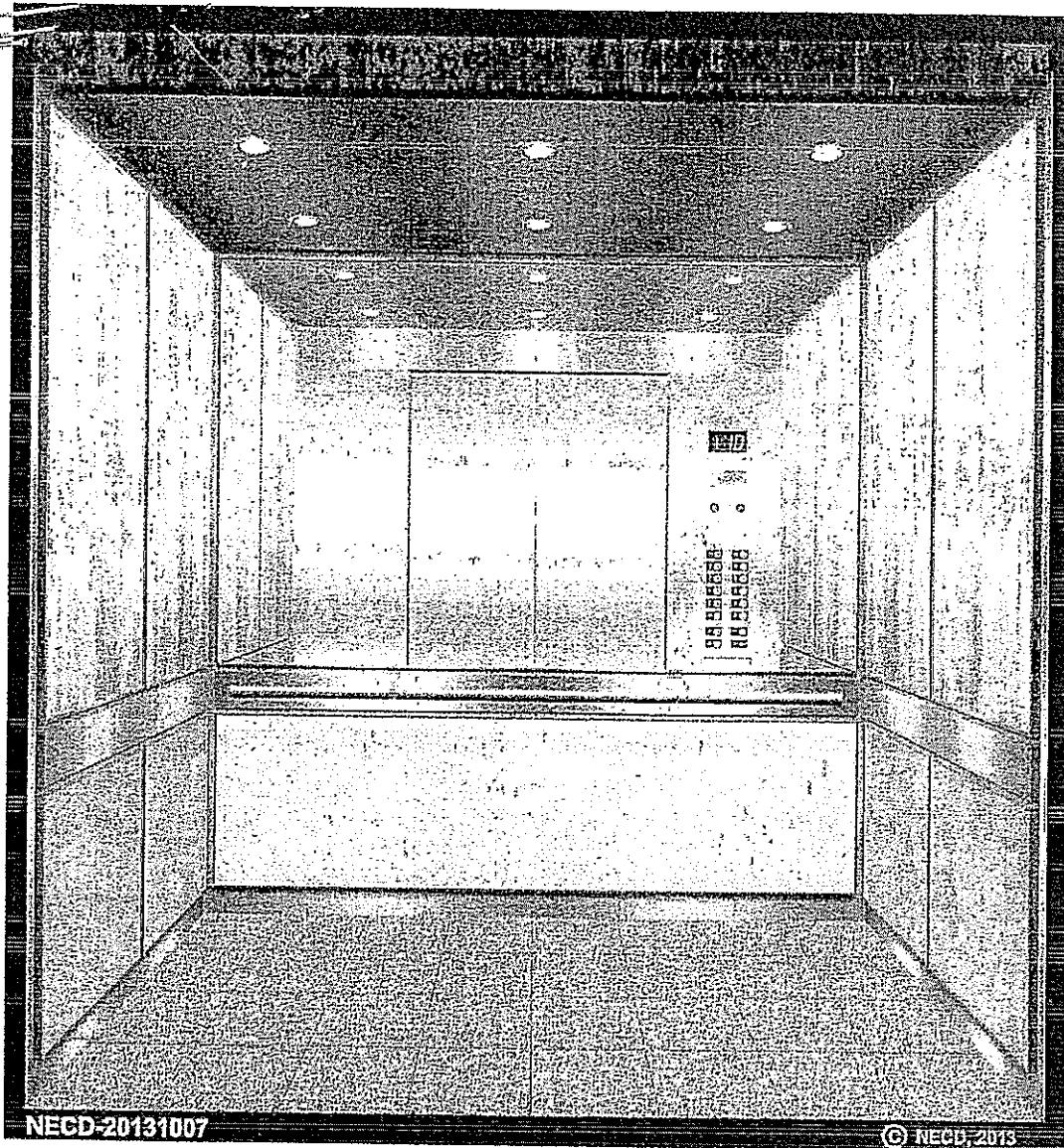
TO BE COMPLETED BY THE SUPERINTENDENT AFTER MOVE-OUT OR MOVE-IN:

THE MOVE-OUT/MOVE-IN (CIRCLE ONE) OF THE ABOVE APARTMENT HAS TAKEN PLACE ON _____ (DATE) AND (CHECK ONE):

() NO DAMAGE HAS OCCURRED TO THE COMMON AREAS.
() THE FOLLOWING DAMAGES HAVE OCCURRED TO THE COMMON AREAS:

Superintendent

Date



NECD-20131007

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NAME: _____

APT. #: _____

DATE OF MOVE/IN - MOVE/OUT: _____

NO DAMAGE DONE
 DAMAGE DONE TO INDICATED AREAS

(CIRCLED AREAS INDICATE NEW DAMAGE)

INSPECTED BY: _____

OWNER/RESIDENT SIGNATURE

SUPERINTENDENT SIGNATURE