



# Check-out Accommodation rented by PSUAD

## OCCUPANT

Name:

Position:

Occupation from/to:

Check-in Done:

## CHECK OUT BY PSUAD REPRESENTATIVE

Name:

Position:

ADDC Clearance:

Check-out Done:

## ACCOMMODATION LOCATION:

Number of Keys Provided:

## DEGRADATIONS (IF ANY):

## MISSING PARTS (IF ANY):

### PSUAD Representative

Name:

Position:

Date:

Signature:

### PSUAD Occupant

Name:

Position:

Date:

Signature:

### Landlord Representative

Name:

Position:

Date:

Signature: