

Initial _____

WALK THROUGH / CHECK-LIST Equal Housing Opportunity



Property: 5428 Moxie Blvd; Orlando, FL 32839.

List and Describe items of concern:

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The above information, to the best of my knowledge, is true and correct.

Please sign: X _____

Name of Applicant

Date

Name (please print)

X _____

Signature

Date

OFFICE NOTES: Received by _____ Date _____