



# Bluebird Outdoor Adventures

## Check in/out Checklist

Renter Name: \_\_\_\_\_

RV Rented: \_\_\_\_\_

Auto Insurance: \_\_\_\_\_

Date: \_\_\_\_\_

D.L Number: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Address:

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Damage Deposit: \$ \_\_\_\_\_ (Cash, Check, Charge)  
RV deposit will be refunded in full based on the condition of the RV at return. Any damages will be taken out of the damage deposit. The remaining damage deposit will be returned within 10 business days after the RV has been returned and damages assessed.

Line out and initial line items that are not applicable.

### Exterior

Out	In	COMMENTS
<input type="checkbox"/> Awning	<input type="checkbox"/>	_____
<input type="checkbox"/> Entry Door, Step, Screen	<input type="checkbox"/>	_____
<input type="checkbox"/> Cleanliness	<input type="checkbox"/>	_____
<input type="checkbox"/> Propane Level	<input type="checkbox"/>	_____
<input type="checkbox"/> Generator	<input type="checkbox"/>	_____
<input type="checkbox"/> Hyd Jacks	<input type="checkbox"/>	_____
<input type="checkbox"/> Ladder	<input type="checkbox"/>	_____
<input type="checkbox"/> Power Cable	<input type="checkbox"/>	_____
<input type="checkbox"/> Cleanliness	<input type="checkbox"/>	_____
<input type="checkbox"/> Propane Tank	<input type="checkbox"/>	_____



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<input type="checkbox"/> roof (vents, AC)	<input type="checkbox"/>	_____
<input type="checkbox"/> RV Driver Side	<input type="checkbox"/>	_____
<input type="checkbox"/> RV Front	<input type="checkbox"/>	_____
<input type="checkbox"/> RV Rear	<input type="checkbox"/>	_____
<input type="checkbox"/> Sewer Hose and Tanks	<input type="checkbox"/>	_____
<input type="checkbox"/> Storage Bins	<input type="checkbox"/>	_____
<input type="checkbox"/> Tire Condition	<input type="checkbox"/>	_____
<input type="checkbox"/> Undercarriage Damage	<input type="checkbox"/>	_____
<input type="checkbox"/> Water Heater	<input type="checkbox"/>	_____
<input type="checkbox"/> Water Hook Up	<input type="checkbox"/>	_____
<input type="checkbox"/> Water Tank Fill	<input type="checkbox"/>	_____

## Interior

### Out

	In	COMMENTS
<input type="checkbox"/> AC/Heater	<input type="checkbox"/>	_____
<input type="checkbox"/> Air Vents	<input type="checkbox"/>	_____
<input type="checkbox"/> Bath Sink	<input type="checkbox"/>	_____
<input type="checkbox"/> Battery Disconnect	<input type="checkbox"/>	_____
<input type="checkbox"/> Bed	<input type="checkbox"/>	_____
<input type="checkbox"/> Cabinets	<input type="checkbox"/>	_____
<input type="checkbox"/> Dinette	<input type="checkbox"/>	_____
<input type="checkbox"/> Fire Extinguisher	<input type="checkbox"/>	_____
<input type="checkbox"/> First Aid Kit	<input type="checkbox"/>	_____

Enclosure (2)



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<input type="checkbox"/> Floors	<input type="checkbox"/> _____
<input type="checkbox"/> Furniture	<input type="checkbox"/> _____
<input type="checkbox"/> Interior Cleanliness	<input type="checkbox"/> _____
<input type="checkbox"/> Kitchen Sink	<input type="checkbox"/> _____
<input type="checkbox"/> Microwave	<input type="checkbox"/> _____
<input type="checkbox"/> Refrigerator	<input type="checkbox"/> _____
<input type="checkbox"/> RV Manual	<input type="checkbox"/> _____
<input type="checkbox"/> Stove/Oven	<input type="checkbox"/> _____
<input type="checkbox"/> Toilet/Shower	<input type="checkbox"/> _____
<input type="checkbox"/> TV/DVD	<input type="checkbox"/> _____
<input type="checkbox"/> Windows, Blinds, Shades	<input type="checkbox"/> _____

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Date \_\_\_\_\_

I have inspected the vehicle and have been instructed as to its proper use. I acknowledge that the vehicle is clean inside and outside and is undamaged exempt as noted above and/or shown on the RV diagram.

I understand that any interior or exterior RV damage not listed on this form will be my sole responsibility. I agree to pay for any damage whether or not due to the fault of myself or others in my party



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Renter Name

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Signature

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Date

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Check In Signature

You are signing confirming everything in accordance with the RV check in.

Renter Name

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Signature:

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Date

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