

Handover Protocol

General information buyer

First and Last Name

Full address

General information seller

First and Last Name

Full address

Handover Protocol

urbyo

Property data

Address

Date of delivery

Date of last
renovation work

List of renovations

Ancillary costs paid
until

Fees/services paid
until

Handover Protocol

Room	Description of defects	No defects
Hallway		<input type="checkbox"/>
Bathroom		<input type="checkbox"/>
Guest-WC		<input type="checkbox"/>
Room 1		<input type="checkbox"/>
Room 2		<input type="checkbox"/>
Living room		<input type="checkbox"/>
Kitchen		<input type="checkbox"/>
Bedroom		<input type="checkbox"/>
Terrace/balcony		<input type="checkbox"/>

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Room	Description of defects	No defects
Cellar	<input type="text"/>	<input type="checkbox"/>
Attic	<input type="text"/>	<input type="checkbox"/>
Garage	<input type="text"/>	<input type="checkbox"/>
	<input type="text"/>	<input type="checkbox"/>
	<input type="text"/>	<input type="checkbox"/>
	<input type="text"/>	<input type="checkbox"/>

The defects are to be professionally eliminated

by

until

Handover Protocol

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Meter for

Meter number

Meter reading

Water

Heat

Electricity

Gas

Oil

Key for

Number of keys

House/Apartment

Mailbox

Cellar/Attic

Garage

Other

In the event of loss, the buyer bears the costs of restoring the security.

Handover Protocol



Documents	Received	Not received
Floor plans	<input type="checkbox"/>	<input type="checkbox"/>
Blueprints	<input type="checkbox"/>	<input type="checkbox"/>
Measurements	<input type="checkbox"/>	<input type="checkbox"/>
Current property tax assessment	<input type="checkbox"/>	<input type="checkbox"/>
Insurance documents	<input type="checkbox"/>	<input type="checkbox"/>
Maintenance contracts	<input type="checkbox"/>	<input type="checkbox"/>
Rental agreements	<input type="checkbox"/>	<input type="checkbox"/>
Tenant files	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

Handover Protocol

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Acquired accessories & inventory



Other comments



Handover Protocol

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Witness 1

First and Last Name

Full address

Signature

Witness 2

First and Last Name

Full address

Signature

Handover Protocol

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Handover protocol received

All contracting parties have received a copy of the handover protocol.

Yes

No

Buyer or representative

Place, date

Signature

Seller or representative

Place, date

Signature
