



Move Out Inventory & Condition Form

Inspection Date	Technician	Property	Units
02-03-2022	Lisa Shuler	Gateway Towers	C224

Approved By	Marva Brown
Resident Name	Kevin Jackson
Forwarding Mailing Address	8026 Chelwynde AvePhiladelphia, PA. 19153
Date Resident Turned in Keys	01-31-2022

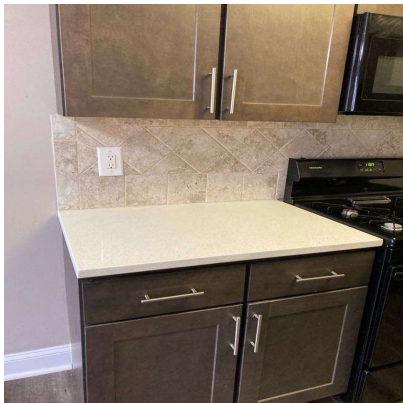
Damage Summary				
Main Category	Sub Category	Charges Type	Note	Charges
KITCHEN	Fire Stops	Replace		\$0.00
BATHROOM	Ceiling Lights	Repair	Not chargeable damage	\$0.00
MISCELLANEOUS	Cabinet Equipment	Repair		\$0.00
MISCELLANEOUS	If fire stops have been installed throughout the property, ensure fire stops are installed.	Replace		\$0.00
Additional Damage Charges				
Total Charges				\$0.00

LIVING ROOM:	
Ceilings / Lights:	Ok
Door / Closet:	Ok
Other:	Ok
Walls / Outlets:	Ok
Window:	Ok
Window coverings:	Ok

DINING ROOM:	
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Ceilings / Lights:	Ok
Walls / Outlets:	Ok
Window:	Ok
Window coverings:	Ok

KITCHEN:	
Backsplash:	Ok
Cabinets:	Ok
Ceiling Fan:	Ok
Ceiling Light Fixture:	Ok
Ceiling Lights:	Ok
Cleaning of Stove:	Ok
Counter Top:	Ok
Dishwasher:	Ok
Drip Pan:	Ok
Electric Meter:	Ok
Faucet:	Ok
Faucet Knobs:	Ok
Fire Stops:	Not Ok
Charges Type	Replace
Charges	
Comment	Missing



Floors:	Ok
Formica/Tiles:	Ok
Garbage Disposal:	Ok
Kitchen Sink:	Ok
Microwave:	Ok

Other:	Ok
Oven / Range:	Ok
Oven Door Handle:	Ok
Oven Racks:	Ok
Range Top:	Ok
Refrigerator (Freezer):	
Cleaning Refrigerator:	Ok
Refrigerator (Freezer):	
Refrigerator (Drawers):	Ok
Refrigerator (Freezer):	
Refrigerator (Shelf and Bars):	Ok
Refrigerator (Freezer):	
Refrigerator Crisper Glass/Plastic:	Ok
Rubber Stopper:	Ok
Stove Knob:	Ok
Wall Outlets:	Ok
Washer/Dryer:	Ok
Window Coverings:	Ok

BEDROOMS:	
Ceilings / Lights:	Ok
Comment	Water/Leak stain



Door / Closet:	Ok
Floors / Carpet:	Ok
Other:	Ok

Walls / Outlets:	Ok
Window:	Ok
Window coverings:	Ok

BATHROOM:	
Cabinets / Mirror:	Ok
Ceiling Lights:	Not Ok
Charges Type	Repair
Charges	
Comment	Leak stain



Cleaning Bathroom:	Ok
Complete Toilet:	Ok
Counter Top:	Ok
Floors:	Ok
Formica /Tile:	Ok
Medicine Cabinet:	Ok
Mirror Cabinet:	Ok
Other:	Ok
Shower Curtain Bar:	Ok
Shower Head:	Ok
Sink:	Ok
Soad Dish (Tub):	Ok
Toilet Paper Holder:	Ok
Toilet Tank:	Ok
Towel Bar:	Ok
Tub Knob(s):	Ok
Tub Reglazing:	Ok

Vanity Cabinet:	Ok
Wall Outlets:	Ok
Window:	Ok

LOCKS:	
Door Knob:	Ok
Door Lock:	Ok
Ensure the apartment door has an automatic closure and closes properly. :	Ok
Fix Door when extra lock is removed:	Ok
Mail-Box Lock:	Ok

KEYS:	
Failure To Return Apartment Key:	Ok
Failure To Return Mailbox Key:	Ok

DOORS:	
Apartment Door:	Ok
Apartment Door closes automatically:	Ok
Frame:	Ok
Hollow:	Ok
Solid Core & Steel:	Ok

PAINTING:	
Border Removal (Per Room):	Ok
Holes in Walls (Each Hole):	Ok
Over Dark Colors (Per Room):	Ok
Wallpaper Removal (Per Room):	Ok

MISCELLANEOUS:	
Broken Window Glass (Per Pane):	Ok
Cabinet Equipment:	Not Ok
Charges Type	Repair
Charges	
Comment	Kitchen Cabinet needs touch up



Carbon Monoxide Detector:	Ok
Clear Storage Locker:	Ok
Closet Shelves:	Ok
Fire extinguisher:	Ok
If fire stops have been installed throughout the property, ensure fire stops are installed.:	Not Ok
Charges Type	Replace
Charges	
Comment	No fire stop



Mini Blind(s) each:	Ok
Removal Of Bulk Items:	Ok
Remove Debris (Per Bag):	Ok
Sliding Mirror/Glass Door (2):	Ok
Smoke Detector Alarm:	Ok
Vertical Blinds:	Ok
Window Screen(s) each:	Ok
Window Sills:	Ok

OVERALL:	
Signs of Moisture inside the apartment:	Ok

Signs of Moisture outside the apartment:	Ok
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Resident	
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Lindy Community Representative Name	Lisa Shuler
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Technician	Lisa Shuler
Resident not available for signature	YES
Resident refused Signature	NO