

## **Move Out Inventory & Condition Form**

Inspection Date	Technician	Property	Units
02-08-2024	Shawn Hargett	York House (South)	0109

Approved By	John Samuel
Resident Name	landmark Landmark Health Group Inc
Forwarding Mailing Address	1320 W. somerville Ave, Apt C, Philadelphia, PA 19141
Date Resident Turned in Keys	02-07-2024

Damage Summary				
Main Category	Sub Category	Charges Type	Note	Charges
Refrigerator (Freezer)	Cleaning Refrigerator	Clean		\$60.00
LIVING ROOM	Other	Clean	have furniture left in unit	\$150.00
KITCHEN	Other	Clean		\$0.00
BEDROOMS	Other	Clean	have furniture left in unit	\$150.00
Additional Damage Charges				
			Total Charges	\$360.00

LIVING ROOM:	
Ceilings / Lights:	Ok
Door / Closet:	Ok
Other:	Not Ok
Charges Type	Clean
Charges	
Comment	Needs to be cleaned out



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

DINING ROOM:	
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
Floors:	Ok
Formica/Tiles:	Ok
Garbage Disposal:	Ok
Kitchen Sink:	Ok

Microwave:	Ok
Other:	Not Ok
Charges Type	Clean
Charges	
Comment	Needs to be cleaned out



Oven / Range:	Ok
Oven Door Handle:	Ok
Oven Racks:	Ok
Range Top:	Ok

Refrigerator (Freezer):	
Cleaning Refrigerator:	Not Ok
Charges Type	Clean
Charges	
Comment	Needs to be cleaned down



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
Verify that either a Fire Stop (under the microwave) or FireAvert (behind the stove) exists.:	Ok
Wall Outlets:	Ok
Washer/Dryer:	Ok
Window Coverings:	Ok

BEDROOMS:	
Ceilings / Lights:	Ok
Door / Closet:	Ok
Floors / Carpet:	Ok
Other:	Not Ok
Charges Type	Clean
Charges	
Comment	Needs to be cleaned out



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

BATHROOM:	
Cabinets / Mirror:	Ok
Ceiling Lights:	Ok

Cleaning Bathroom:	Ok
Complete Toilet:	Ok
Counter Top:	Ok
Floors:	Ok
Formica /Tile:	Ok
Is there signs of moisture from outside in the apartment?:	Ok
Medicine Cabinet:	Ok
Mirror Cabinet:	Ok
Other:	Ok
Remove Mildew on Tiles:	Ok
Shower Curtain Bar:	Ok
Shower Head:	Ok
Sink:	Ok
Soad Dish (Tub):	Ok
Soap Dish (Sink):	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

CARPET:	
Burns:	Ok
Deodorize:	Ok
Pet Treatment (Odor):	Ok
Replace Carpet 1 Bedroom:	Ok
Replace Carpet 2 Bedroom:	Ok
Shampoo 1 Bedroom:	Ok
Shampoo 2 Bedroom:	Ok
Stain Removal:	Ok

MISCELLANEOUS:	
Broken Window Glass (Per Pane):	Ok
Cabinet Equipment:	Ok
Carbon Monoxide Detector:	Ok
Cleaning of Apartment:	Ok
Clear Storage Locker:	Ok
Closet Shelves:	Ok
Common Area damaged during moveout:	Ok
Door Intercom System:	Ok
Exhaust Fan:	Ok
Fan Blades:	Ok
If fire stops have been installed throughout the property, ensure fire stops are installed.:	Ok
If there are sprinkler heads, are they painted?:	Yes
If there are sprinklers, are the sprinkler pipes painted?:	Yes
Light Globes:	Ok
Mini Blind(s) each:	Ok
Outside Lights:	Ok
Phone Jack:	Ok
Rallings:	Ok
Removal Of Bulk Items:	Ok
Remove Debris (Per Bag):	Ok
Sliding Mirror/Glass Door (2):	Ok
Smoke Detector Alarm:	Ok
Stoppage by foreign object in any drain:	Ok

Switch Plate Covers:	Ok
Thermostat Cover:	Ok
Vertical Blinds:	Ok
Vinly Tile Bathroom:	Ok
Vinly Tile Kitchen:	Ok
Was personal property left behind?:	Yes



Comment: Second bathroom Est Value: \$



Comment: Kitchen Est Value: \$



Comment: Est Value: \$



Comment: Kitchen Est Value: \$



Comment: Living room Est Value: \$



Comment: Living room Est Value: \$



Comment: Bedroom Est Value: \$



Comment: Bedroom bedroom

Est Value: \$



Comment: Bedroom Est Value: \$



Comment: Bathroom Est Value: \$

Estimated Value of Personal Property is.	\$0	
Window Screen(s) each:		Ok
Window Sills:		Ok

OVERALL:	
Signs of Moisture inside the apartment:	Ok
Signs of Moisture outside the apartment:	Ok

Lindy Community Representative Name	Shawn Hargett
Emily community representative runne	onawn riargess



Technician	Shawn Hargett
Resident not available for signature	YES