



# Move Out Inventory & Condition Form

| Inspection Date | Technician  | Property            | Units |
|-----------------|-------------|---------------------|-------|
| 03-21-2025      | Luke Krause | Gardens of Mt. Airy | D09   |

|                                                                                 |                 |
|---------------------------------------------------------------------------------|-----------------|
| Approved By                                                                     | Natalie Dixon   |
| Resident Name                                                                   | Cameron Pumilia |
| Forwarding Mailing Address                                                      | Not Available   |
| Date Resident Turned in Keys (For evictions - date all belongings were removed) | 03-21-2025      |

| Damage Summary            |                                    |              |                                         |          |
|---------------------------|------------------------------------|--------------|-----------------------------------------|----------|
| Main Category             | Sub Category                       | Charges Type | Note                                    | Charges  |
| LIVING ROOM               | Walls / Outlets                    | Repair       |                                         | \$0      |
| KITCHEN                   | Faucet                             | Replace      |                                         | \$20     |
| BEDROOMS                  | Floors / Carpet                    | Replace      |                                         | \$0      |
| BATHROOM                  | Tub Reglazing                      | Repair       |                                         | \$0      |
| CARPET                    | Replace Carpet 1 Bedroom           | Replace      | Resident moved in 2022 prorated amount. | \$385    |
| MISCELLANEOUS             | Was personal property left behind? |              |                                         | \$0      |
| MISCELLANEOUS             | Was the resident locked out?       |              |                                         | \$0      |
| Additional Damage Charges |                                    |              |                                         |          |
| Total Charges             |                                    |              |                                         | \$405.00 |

| LIVING ROOM:       |        |
|--------------------|--------|
| Ceilings / Lights: | Ok     |
| Door / Closet:     | Ok     |
| Other:             | Ok     |
| Walls / Outlets:   | Not Ok |

|              |                                  |
|--------------|----------------------------------|
| Charges Type | Repair                           |
| Charges      |                                  |
| Comment      | Holes and chips missing in paint |



|                   |    |
|-------------------|----|
| Window:           | Ok |
| Window coverings: | Ok |

|                     |    |
|---------------------|----|
| <b>DINING ROOM:</b> |    |
| Ceilings / Lights:  | Ok |
| Walls / Outlets:    | Ok |
| Window:             | Ok |
| Window coverings:   | Ok |

|                        |    |
|------------------------|----|
| <b>KITCHEN:</b>        |    |
| Backsplash:            | Ok |
| <b>Cabinets:</b>       |    |
| Cabinet Door:          | Ok |
| <b>Cabinets:</b>       |    |
| Cabinet Handle:        | Ok |
| <b>Cabinets:</b>       |    |
| Cabinet Shelf:         | Ok |
| Ceiling Fan:           | Ok |
| Ceiling Light Fixture: | Ok |
| Ceiling Lights:        | Ok |
| Cleaning of Stove:     | Ok |
| Counter Top:           | Ok |

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|--------------------|--|----|
| <b>Dishwasher:</b> |  |    |
| Dishwasher Knob:   |  | Ok |

  

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| <b>Dishwasher:</b> |  |    |
| Dishwasher Rack:   |  | Ok |

  

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| <b>Dishwasher:</b>            |  |    |
| Dishwasher Silverware Holder: |  | Ok |

  

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|-----------------|---------|
| Drip Pan:       | Ok      |
| Electric Meter: | Ok      |
| Faucet:         | Not Ok  |
| Charges Type    | Replace |
| Charges         |         |
| Comment         | Leaks   |

  
  

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|-------------------|----|
| Faucet Knobs:     | Ok |
| Floors:           | Ok |
| Formica/Tiles:    | Ok |
| Garbage Disposal: | Ok |
| Kitchen Sink:     | Ok |
| Microwave:        | Ok |
| Other:            | Ok |

  

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|----------------------|--|----|
| <b>Oven / Range:</b> |  |    |
| Oven Cleaning:       |  | Ok |

  

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|----------------------|--|----|
| <b>Oven / Range:</b> |  |    |
| Oven door handle:    |  | Ok |

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|----------------------|--|----|
| <b>Oven / Range:</b> |  |    |
| Oven drip pan:       |  | Ok |

|                      |  |    |
|----------------------|--|----|
| <b>Oven / Range:</b> |  |    |
| Oven knobs:          |  | Ok |

|                      |  |    |
|----------------------|--|----|
| <b>Oven / Range:</b> |  |    |
| Oven Racks:          |  | Ok |

|                      |  |    |
|----------------------|--|----|
| <b>Oven / Range:</b> |  |    |
| Range burners:       |  | Ok |

|                      |  |    |
|----------------------|--|----|
| <b>Oven / Range:</b> |  |    |
| Range Hood:          |  | Ok |

|                   |  |    |
|-------------------|--|----|
| Oven Door Handle: |  | Ok |
| Oven Racks:       |  | Ok |
| Range Top:        |  | Ok |

|                                |  |    |
|--------------------------------|--|----|
| <b>Refrigerator (Freezer):</b> |  |    |
| Cleaning Refrigerator:         |  | Ok |

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|--------------------------------|--|----|
| <b>Refrigerator (Freezer):</b> |  |    |
| Refrigerator (Drawers):        |  | Ok |

|                                |  |    |
|--------------------------------|--|----|
| <b>Refrigerator (Freezer):</b> |  |    |
| Refrigerator (Shelf and Bars): |  | Ok |

|                                     |  |    |
|-------------------------------------|--|----|
| <b>Refrigerator (Freezer):</b>      |  |    |
| 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 |

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|------------------|--|
| <b>BEDROOMS:</b> |  |
|------------------|--|

|                    |                        |
|--------------------|------------------------|
| Ceilings / Lights: | Ok                     |
| Door / Closet:     | Ok                     |
| Floors / Carpet:   | Not Ok                 |
| Charges Type       | Replace                |
| Charges            |                        |
| Comment            | Carpet was not cleaned |



|                   |    |
|-------------------|----|
| Other:            | Ok |
| Walls / Outlets:  | Ok |
| Window:           | Ok |
| Window coverings: | Ok |

| <b>BATHROOM:</b>                                           |    |
|------------------------------------------------------------|----|
| 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:       | Not Ok             |
| Charges Type         | Repair             |
| Charges              |                    |
| Comment              | Tub needs reglazed |



|                 |    |
|-----------------|----|
| Vanity Cabinet: | Ok |
| Wall Outlets:   | Ok |
| Window:         | Ok |

|                                                                           |    |
|---------------------------------------------------------------------------|----|
| <b>LOCKS:</b>                                                             |    |
| 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 |

|                                  |    |
|----------------------------------|----|
| <b>KEYS:</b>                     |    |
| Failure To Return Apartment Key: | Ok |
| Failure To Return Mailbox Key:   | Ok |

|                                      |    |
|--------------------------------------|----|
| <b>DOORS:</b>                        |    |
| Apartment Door:                      | Ok |
| Apartment Door closes automatically: | Ok |

|                     |    |
|---------------------|----|
| Frame:              | Ok |
| Hollow:             | Ok |
| Solid Core & Steel: | Ok |

|                               |    |
|-------------------------------|----|
| <b>PAINTING:</b>              |    |
| Border Removal (Per Room):    | Ok |
| Holes in Walls (Each Hole):   | Ok |
| Over Dark Colors (Per Room):  | Ok |
| Wallpaper Removal (Per Room): | Ok |

|                           |                                                       |
|---------------------------|-------------------------------------------------------|
| <b>CARPET:</b>            |                                                       |
| Burns:                    | Ok                                                    |
| Deodorize:                | Ok                                                    |
| Pet Treatment (Odor):     | Ok                                                    |
| Replace Carpet 1 Bedroom: | Not Ok                                                |
| Charges Type              | Replace                                               |
| Charges                   |                                                       |
| Comment                   | Carpets was not cleaned, needs replaced due to stains |



|                           |    |
|---------------------------|----|
| Replace Carpet 2 Bedroom: | Ok |
| Shampoo 1 Bedroom:        | Ok |

|                    |    |
|--------------------|----|
| Shampoo 2 Bedroom: | Ok |
| Stain Removal:     | Ok |

| <b>MISCELLANEOUS:</b>                                                                        |        |
|----------------------------------------------------------------------------------------------|--------|
| 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     |
| 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?:                                                          | No     |
| Charges Type                                                                                 |        |
| Charges                                                                                      | 0      |
| Was the resident locked out?:                                                                | Not Ok |

|                        |    |
|------------------------|----|
| Charges Type           |    |
| Charges                | 0  |
| Window Screen(s) each: | Ok |
| Window Sills:          | Ok |

|                                          |    |
|------------------------------------------|----|
| <b>OVERALL:</b>                          |    |
| 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 | Luke Krause |
|-------------------------------------|-------------|



|                                      |             |
|--------------------------------------|-------------|
| Technician                           | Luke Krause |
| Resident not available for signature | YES         |