

## **Make Ready Checklist Inspection**

| Inspection Date | Technician      | Property          | Units  |
|-----------------|-----------------|-------------------|--------|
| 04-06-2023      | Alysa Imprescia | Towers at Wyncote | 0618-1 |

| LIVING ROOM:       |   |
|--------------------|---|
| Ceilings / Lights: | Ok  |
| Door / Closet:     | Not Ok  |
| Charges Type       |   |
| Charges            | 0   |
| Comment            | Large hall storage closet- Remove far wall shelf per resident request (shorter wire shelf) but keep the hooks that are below it |



| Other:       | Not Ok   |
|--------------|--|
| Charges Type |  |
| Charges      | 0  |
| Comment      | Resident asking about powerwashing balcony or other cosmetic fix |



| Plank Flooring:       | Ok                      |    |    |
|-----------------------|-------------------------|----|----|
| Walls / Outlets:      | Ok                      |    |    |
| Window:               | Ok                      |    |    |
| Window coverings:     | Ok                      |    |    |
| DINING ROOM:          |                         |    |    |
| Ceilings / Lights:    |                         |    | Ok |
| Plank Flooring:       |                         |    | Ok |
| Walls / Outlets:      |                         |    | Ok |
| Window:               |                         |    | Ok |
| Window coverings:     |                         |    | Ok |
| KITCHEN:              |                         |    |    |
| Backsplash:           |                         | Ok |    |
| Cabinets:             | Cabinets:               |    |    |
| Cabinet Door: Ok      |                         | Ok |    |
| Cabinets:             |                         |    |    |
| Cabinet Handle:       | Cabinet Handle: Ok      |    | Ok |
| Cabinets:             |                         |    |    |
| Cabinet Shelf: Ok     |                         | Ok |    |
| Ceiling Fan:          |                         | Ok |    |
| Ceiling Light Fixture | iling Light Fixture: Ok |    |    |
| Ceiling Lights:       |                         | Ok |    |
| Cleaning of Stove:    |                         | Ok |    |
| Counter Top: Ok       |                         |    |    |
| Dishwasher:           |                         |    |    |
| Dishwasher Knob:      |                         |    | Ok |
| Dishwasher:           |                         |    |    |
| Dishwasher Rack:      |                         |    | Ok |
| Dishwasher:           |                         |    |    |
|                       |                         |    |    |

| Drip Pan:          | Ok                                 |
|--------------------|------------------------------------|
| Electric Meter: Ok |                                    |
| Faucet:            | Ok                                 |
| Faucet Knobs:      | Ok                                 |
| Floors:            | Ok                                 |
| Formica/Tiles:     | Ok                                 |
| Garbage Disposal:  | Not Ok                             |
| Charges Type       |                                    |
| Charges            | 0                                  |
| Comment            | Sink rubber gasket needs replacing |
| Kitchen Sink:      | Ok                                 |
| Microwave:         | Ok                                 |
| Other:             | Ok                                 |
| Oven / Range:      |                                    |
| Oven Cleaning:     | Ok                                 |
| Oven / Range:      |                                    |
| Oven door handle:  | Ok                                 |
| Oven / Range:      |                                    |
| Oven drip pan:     | Ok                                 |
| Oven / Range:      |                                    |
| Oven knobs: Ok     |                                    |
| Oven / Range:      |                                    |
| Oven Racks:        | Ok                                 |
| Oven / Range:      |                                    |
| Range burners:     | Ok                                 |
| Oven / Range:      |                                    |
| Range Hood:        | Ok                                 |
| Oven Door Handle:  | Ok                                 |
| Oven Racks: Ok     |                                    |
| Range Top: Ok      |                                    |

| Refrigerator (Freezer): |    |
|-------------------------|----|
| Cleaning Refrigerator:  | Ok |

| Refrigerator (Freezer): |   |
|-------------------------|---|
| Refrigerator (Drawers): | Not Ok  |
| Charges Type            |   |
| Charges                 | 0   |
| Comment                 | Fridge motor making load noise. Resident wants it fixed or replaced |



| Refrigerator (Freezer):        |    |
|--------------------------------|----|
| Refrigerator (Shelf and Bars): | Ok |

| Refrigerator (Freezer):             |  |    |
|-------------------------------------|--|----|
| Refrigerator Crisper Glass/Plastic: |  | Ok |
| Rubber Stopper: Ok                  |  |    |
| Stove Knob.                         |  |    |

| The state of the s |    |
|--|----|
| 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: | Not Ok  |
| Charges Type       |   |
| Charges            | 0   |
| Comment            | One of the bulbs in Closet light in second bedroom is out |



| Door / Closet:   | Ok  |
|------------------|---|
| Floors / Carpet: | Ok  |
| Other:           | Not Ok  |
| Charges Type     |   |
| Charges          | 0   |
| Comment          | Carpet stain in second bedroom and needs refresh in primary bedroom |



| Plank Flooring:   | Ok |
|-------------------|----|
| Walls / Outlets:  | Ok |
| Window:           | Ok |
| Window coverings: | Ok |

| BATHROOM:          |                             |
|--------------------|-----------------------------|
| Cabinets / Mirror: | Ok                          |
| Ceiling Lights:    | Ok                          |
| Cleaning Bathroom: | Not Ok                      |
| Charges Type       |                             |
| Charges            | 0                           |
| Comment            | Smoke odor in hall bathroom |
| 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:   | Not Ok                              |
| Charges Type   |                                     |
| Charges  | 0                                   |
| Comment  | Closet door off in primary bathroom |



| Plank Flooring:         | 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:   |    |

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

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

| 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         |
| Confirm you have installed or there is in place a stainless steel toilet tank water connector.: | 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         |
| Date of Installation  | 2023-04-06 |
| 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         |
| Window Screen(s) each:  | Ok         |
| Window Sills:   | Ok         |

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

| Technician | Alysa Imprescia |
|------------|-----------------|

Alysa Imprescia

Lindy Community Representative Name

Resident not available for signature