



## Move Out Inventory & Condition Form

| Inspection Date | Technician  | Property | Units  |
|-----------------|-------------|----------|--------|
| 04-19-2024      | Noel Nation | Enclaves | 3964B2 |

|                              |   |
|------------------------------|---|
| Approved By                  | Melissa Verdon                                  |
| Resident Name                | Precetti Inc                                    |
| Forwarding Mailing Address   | 3401 North Miami Ave, Ste. 229, Miami, FL 33127 |
| Date Resident Turned in Keys | 04-18-2024                                      |

| Damage Summary            |                            |              |      |         |
|---------------------------|----------------------------|--------------|------|---------|
| Main Category             | Sub Category               | Charges Type | Note | Charges |
| Oven / Range              | Oven Cleaning              | Clean        |      | \$0.00  |
| KITCHEN                   | Cleaning of Stove          | Replace      |      | \$0.00  |
| KITCHEN                   | Microwave                  | Clean        |      | \$0.00  |
| PAINTING                  | Holes in Walls (Each Hole) | Repair       |      | \$40.00 |
| Additional Damage Charges |                            |              |      |         |
| Total Charges             |                            |              |      | \$40.00 |

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

| DINING ROOM:       |    |
|--------------------|----|
| Ceilings / Lights: | Ok |
| Walls / Outlets:   | Ok |

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

|                        |               |
|------------------------|---------------|
| <b>KITCHEN:</b>        |               |
| Backsplash:            | Ok            |
| Cabinets:              | Ok            |
| Ceiling Fan:           | Ok            |
| Ceiling Light Fixture: | Ok            |
| Ceiling Lights:        | Ok            |
| Cleaning of Stove:     | Not Ok        |
| Charges Type           | Replace       |
| Charges                |               |
| Comment                | Dirty stained |



|                               |    |
|-------------------------------|----|
| Counter Top:                  | Ok |
| <b>Dishwasher:</b>            |    |
| Dishwasher Knob:              | Ok |
| <b>Dishwasher:</b>            |    |
| Dishwasher Rack:              | Ok |
| <b>Dishwasher:</b>            |    |
| Dishwasher Silverware Holder: | Ok |
| Drip Pan:                     | Ok |
| Electric Meter:               | Ok |
| Faucet:                       | Ok |
| Faucet Knobs:                 | Ok |
| Floors:                       | Ok |

|                   |        |
|-------------------|--------|
| Formica/Tiles:    | Ok     |
| Garbage Disposal: | Ok     |
| Kitchen Sink:     | Ok     |
| Microwave:        | Not Ok |
| Charges Type      | Clean  |
| Charges           |        |
| Comment           | Dirty  |



|        |    |
|--------|----|
| Other: | Ok |
|--------|----|

| Oven / Range:  |        |
|----------------|--------|
| Oven Cleaning: | Not Ok |
| Charges Type   | Clean  |
| Charges        |        |
| Comment        | Dirty  |



| Oven / Range:     |    |
|-------------------|----|
| Oven door handle: | Ok |

| Oven / Range:  |    |
|----------------|----|
| 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 |

|                                |  |    |
|--------------------------------|--|----|
| <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 |

|                    |  |    |
|--------------------|--|----|
| <b>BEDROOMS:</b>   |  |    |
| Ceilings / Lights: |  | Ok |
| Door / Closet:     |  | Ok |
| Floors / Carpet:   |  | Ok |

|                   |    |
|-------------------|----|
| 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:   | Ok |
| 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): | Not Ok              |
| Charges Type                | Repair              |
| Charges                     |                     |
| Comment                     | Holes in wall eight |



|                               |    |
|-------------------------------|----|
| Over Dark Colors (Per Room):  | Ok |
| Wallpaper Removal (Per Room): | Ok |

|                |    |
|----------------|----|
| <b>CARPET:</b> |    |
| Burns:         | Ok |
| Deodorize:     | Ok |

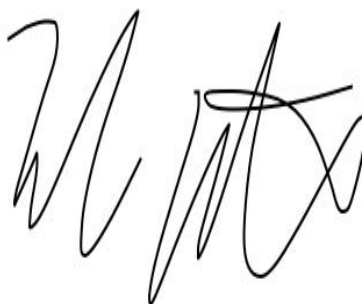
|                           |    |
|---------------------------|----|
| Pet Treatment (Odor):     | Ok |
| Replace Carpet 1 Bedroom: | Ok |
| Replace Carpet 2 Bedroom: | Ok |
| Shampoo 1 Bedroom:        | Ok |
| Shampoo 2 Bedroom:        | Ok |
| Stain Removal:            | Ok |

| <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         |
| Date of Installation   | 2024-04-19 |
| 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 |
| Estimated Value of Personal Property is. | \$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 |

|                                     |             |
|-------------------------------------|-------------|
| Resident                            |             |
| <div></div>                         |             |
| Lindy Community Representative Name | Noel Nation |



|                                      |             |
|--------------------------------------|-------------|
| Technician                           | Noel Nation |
| Resident not available for signature | YES         |