



## Move Out Inventory & Condition Form

| Inspection Date | Technician  | Property          | Units  |
|-----------------|-------------|-------------------|--------|
| 05-19-2020      | Josh Kozich | Towers at Wyncote | 0909-2 |

|                              |                                    |
|------------------------------|------------------------------------|
| Resident Name                | Chen Wu                            |
| Forwarding Mailing Address   | 157-28 20 AVE. Whitestone NY 11357 |
| Date Resident Turned in Keys | May-19-2020                        |

| Damage Summary            |                          |              |                                     |           |
|---------------------------|--------------------------|--------------|-------------------------------------|-----------|
| Main Category             | Sub Category             | Charges Type | Note                                | Charges   |
| LIVING ROOM               | Other                    | Clean        | Trash out - living room-bedrooms    | \$300.00  |
| KITCHEN                   | Cleaning Refrigerator    | Clean        |                                     | \$60.00   |
| KITCHEN                   | Other                    | Clean        | Cleaning of kitchen sink-counter    | \$25.00   |
| BEDROOMS                  | Other                    | Clean        |                                     | \$0.00    |
| BATHROOM                  | Cleaning Bathroom        | Clean        |                                     | \$75.00   |
| CARPET                    | Shampoo 1 Bedroom        | Replace      |                                     | \$0.00    |
| CARPET                    | Shampoo 2 Bedroom        | Replace      |                                     | \$0.00    |
| CARPET                    | Replace Carpet 1 Bedroom | Replace      | Replace carpet 1st bedroom - stains | \$440.00  |
| CARPET                    | Replace Carpet 2 Bedroom | Replace      | Replace carpet 2nd bedroom - stains | \$440.00  |
| Additional Damage Charges |                          |              |                                     |           |
| Total Charges             |                          |              |                                     | \$1340.00 |

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

|                   |        |
|-------------------|--------|
| Door / Closet:    | Ok     |
| Window coverings: | Ok     |
| Other:            | Not Ok |
| Charges Type      | Clean  |
| Charges           |        |
| Comment           | Clean  |



|                                     |        |
|-------------------------------------|--------|
| <b>DINING ROOM:</b>                 |        |
| Walls / Outlets:                    | Ok     |
| Ceilings / Lights:                  | Ok     |
| Window:                             | Ok     |
| Window coverings:                   | Ok     |
| <b>KITCHEN:</b>                     |        |
| Electric Meter:                     | Ok     |
| Cabinets:                           | Ok     |
| Cabinet Door:                       | Ok     |
| Cabinet Shelf:                      | Ok     |
| Cabinet Handle:                     | Ok     |
| Counter Top:                        | Ok     |
| Refrigerator (Freezer):             | Ok     |
| Refrigerator (Shelf and Bars):      | Ok     |
| Refrigerator (Drawers):             | Ok     |
| Refrigerator Crisper Glass/Plastic: | Ok     |
| Cleaning Refrigerator:              | Not Ok |
| Charges Type                        | Clean  |
| Charges                             |        |
| Comment                             | Clean  |



|                               |    |
|-------------------------------|----|
| Dishwasher Rack:              | Ok |
| Dishwasher Silverware Holder: | Ok |
| Dishwasher Knob:              | Ok |
| Fire Stops:                   | Ok |
| Formica/Tiles:                | Ok |
| Stove Knob:                   | Ok |
| Microwave:                    | Ok |
| Cleaning of Stove:            | Ok |
| Ceiling Lights:               | Ok |
| Garbage Disposal:             | Ok |
| Rubber Stopper:               | Ok |
| Oven Door Handle:             | Ok |
| Oven Racks:                   | Ok |
| Kitchen Sink:                 | Ok |
| Faucet Knobs:                 | Ok |
| Floors:                       | Ok |
| Faucet:                       | Ok |
| Drip Pan:                     | Ok |
| Range Hood:                   | Ok |
| Range Top:                    | Ok |
| Ceiling Light Fixture:        | Ok |
| Backsplash:                   | Ok |
| Ceiling Fan:                  | Ok |
| Washer/Dryer:                 | Ok |
| Wall Outlets:                 | Ok |
| Window Coverings:             | Ok |

|              |        |
|--------------|--------|
| Other:       | Not Ok |
| Charges Type | Clean  |
| Charges      |        |
| Comment      | Clean  |



|                    |        |
|--------------------|--------|
| <b>BEDROOMS:</b>   |        |
| Walls / Outlets:   | Ok     |
| Ceilings / Lights: | Ok     |
| Floors / Carpet:   | Ok     |
| Window:            | Ok     |
| Window coverings:  | Ok     |
| Door / Closet:     | Ok     |
| Other:             | Not Ok |
| Charges Type       | Clean  |
| Charges            |        |
| Comment            | Clean  |



|                   |    |
|-------------------|----|
| <b>BATHROOM:</b>  |    |
| Medicine Cabinet: | Ok |
| Mirror Cabinet:   | Ok |
| Vanity Cabinet:   | Ok |

|                         |        |
|-------------------------|--------|
| Sink:                   | Ok     |
| Toilet Tank Cover:      | Ok     |
| Toilet Tank:            | Ok     |
| Toilet Bowl:            | Ok     |
| Complete Toilet:        | Ok     |
| Toilet Paper Holder:    | Ok     |
| Shower Head:            | Ok     |
| Tub Knob(s):            | Ok     |
| Shower Curtain Bar:     | Ok     |
| Towel Bar:              | Ok     |
| Tub Reglazing:          | Ok     |
| Counter Top:            | Ok     |
| Soap Dish (Sink):       | Ok     |
| Soad Dish (Tub):        | Ok     |
| Remove Mildew on Tiles: | Ok     |
| Cleaning Bathroom:      | Not Ok |
| Charges Type            | Clean  |
| Charges                 |        |
| Comment                 | Clean  |



|                    |    |
|--------------------|----|
| Wall Outlets:      | Ok |
| Ceiling Lights:    | Ok |
| Floors:            | Ok |
| Formica /Tile:     | Ok |
| Cabinets / Mirror: | Ok |
| Window:            | Ok |
| Other:             | Ok |

|   |         |
|---|---------|
| Is there signs of moisture from outside in the apartment?:                | Ok      |
| <b>LOCKS:</b>   |         |
| Door Lock:  | Ok      |
| Door Knob:  | Ok      |
| Fix Door when extra lock is removed:                                      | Ok      |
| Mail-Box Lock:  | Ok      |
| Ensure the apartment door has an automatic closure and closes properly. : | Ok      |
| <b>KEYS:</b>  |         |
| Failure To Return Apartment Key:  | Ok      |
| Failure To Return Mailbox Key:  | Ok      |
| <b>DOORS:</b>   |         |
| Apartment Door:   | Ok      |
| Solid Core & Steel:   | Ok      |
| Frame:  | Ok      |
| Hollow:   | Ok      |
| <b>PAINTING:</b>  |         |
| Over Dark Colors (Per Room):  | Ok      |
| Holes in Walls (Each Hole):   | Ok      |
| Wallpaper Removal (Per Room):   | Ok      |
| Border Removal (Per Room):  | Ok      |
| <b>CARPET:</b>  |         |
| Shampoo 1 Bedroom:  | Not Ok  |
| Charges Type  | Replace |
| Charges   |         |
| Comment   | Replace |



|                    |        |
|--------------------|--------|
| Shampoo 2 Bedroom: | Not Ok |
|--------------------|--------|

|              |         |
|--------------|---------|
| Charges Type | Replace |
| Charges      |         |
| Comment      | Replace |



|                           |         |
|---------------------------|---------|
| Stain Removal:            | Ok      |
| Burns:                    | Ok      |
| Deodorize:                | Ok      |
| Pet Treatment (Odor):     | Ok      |
| Replace Carpet 1 Bedroom: | Not Ok  |
| Charges Type              | Replace |
| Charges                   |         |
| Comment                   | Replace |



|                           |         |
|---------------------------|---------|
| Replace Carpet 2 Bedroom: | Not Ok  |
| Charges Type              | Replace |
| Charges                   |         |
| Comment                   | Replace |



| <b>MISCELLANEOUS:</b>                    |    |
|--|----|
| Remove Debris (Per Bag):                 | Ok |
| Removal Of Bulk Items:                   | Ok |
| Clear Storage Locker:                    | Ok |
| Closet Shelves:                          | Ok |
| Window Sills:                            | Ok |
| Window Screen(s) each:                   | Ok |
| Broken Window Glass (Per Pane):          | Ok |
| Mini Blind(s) each:                      | Ok |
| Vertical Blinds:                         | Ok |
| Sliding Mirror/Glass Door (2):           | Ok |
| Carbon Monoxide Detector:                | Ok |
| Smoke Detector Alarm:                    | Ok |
| Fire extinguisher:                       | Ok |
| Cabinet Equipment:                       | Ok |
| Vinly Tile Kitchen:                      | Ok |
| Vinly Tile Bathroom:                     | Ok |
| Exhaust Fan:                             | Ok |
| Phone Jack:                              | Ok |
| Fan Blades:                              | Ok |
| Light Globes:                            | Ok |
| Door Intercom System:                    | Ok |
| Switch Plate Covers:                     | Ok |
| Rallings:                                | Ok |
| Outside Lights:                          | Ok |
| Stoppage by foreign object in any drain: | Ok |



|  |    |
|--|----|
| Thermostat Cover:  | Ok |
| Cleaning of Apartment:   | Ok |
| Common Area damaged during moveout:  | Ok |
| If fire stops have been installed throughout the property, ensure fire stops are installed.: | Ok |
| <b>OVERALL:</b>  |    |
| Signs of Moisture inside the apartment:  | Ok |
| Signs of Moisture outside the apartment:   | Ok |
| Resident   |    |

|                                     |             |
|-------------------------------------|-------------|
| Lindy Community Representative Name | Josh Kozich |
|-------------------------------------|-------------|



|                                      |             |
|--------------------------------------|-------------|
| Technician                           | Josh Kozich |
| Resident not available for signature | NO          |
| Resident refused Signature           | NO          |