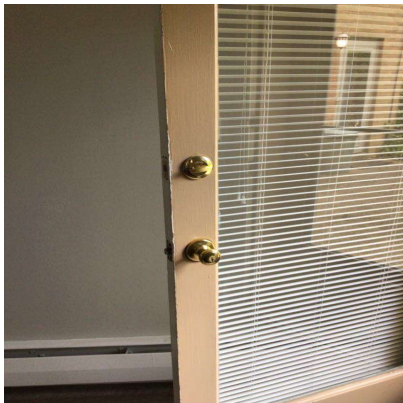




## Make Ready Checklist Inspection

| Inspection Date | Technician | Property      | Units |
|-----------------|------------|---------------|-------|
| 05-27-2021      | Dawn Buck  | Bromley House | C105  |

|                     |                                   |
|---------------------|-----------------------------------|
| <b>LIVING ROOM:</b> |                                   |
| Ceilings / Lights:  | Ok                                |
| Door / Closet:      | Not Ok                            |
| Charges Type        |                                   |
| Charges             | 0                                 |
| Comment             | Lock on wrong backwards installed |



|                  |               |
|------------------|---------------|
| Other:           | Ok            |
| Walls / Outlets: | Not Ok        |
| Charges Type     |               |
| Charges          | 0             |
| Comment          | No usb outlet |



|                   |    |
|-------------------|----|
| 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 |

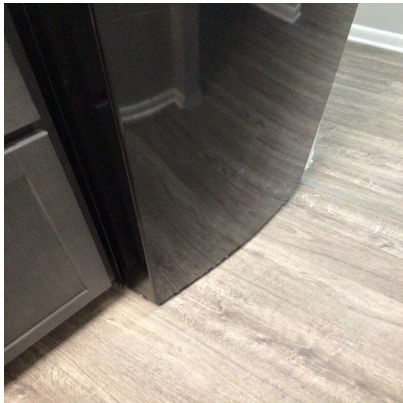
| Dishwasher:      |    |
|------------------|----|
| Dishwasher Knob: | Ok |

| Dishwasher:      |    |
|------------------|----|
| Dishwasher Rack: | Ok |

| Dishwasher:                   |    |
|-------------------------------|----|
| Dishwasher Silverware Holder: | Ok |

|                 |    |
|-----------------|----|
| Drip Pan:       | Ok |
| Electric Meter: | Ok |
| Faucet:         | Ok |

|                   |                                                        |
|-------------------|--------------------------------------------------------|
| Faucet Knobs:     | Ok                                                     |
| Fire Stops:       | Ok                                                     |
| Floors:           | Ok                                                     |
| Formica/Tiles:    | Ok                                                     |
| Garbage Disposal: | Ok                                                     |
| Kitchen Sink:     | Ok                                                     |
| Microwave:        | Ok                                                     |
| Other:            | Not Ok                                                 |
| Charges Type      |                                                        |
| Charges           | 0                                                      |
| Comment           | Refrigerator left side wobbles and debris under fridge |



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

| Oven / Range:           |    |
|-------------------------|----|
| Range Hood:             | Ok |
| Oven Door Handle:       | Ok |
| Oven Racks:             | Ok |
| Range Top:              | Ok |
| Refrigerator (Freezer): | Ok |
| Rubber Stopper:         | Ok |
| Stove Knob:             | Ok |
| Wall Outlets:           | Ok |
| Washer/Dryer:           | Ok |
| Window Coverings:       | Ok |

| BEDROOMS:          |    |
|--------------------|----|
| Ceilings / Lights: | Ok |
| Door / Closet:     | Ok |
| Floors / Carpet:   | Ok |
| Other:             | Ok |
| 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 |

|                                                                           |    |
|---------------------------------------------------------------------------|----|
| <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 |
| 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: | 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 |
| Fire extinguisher:                                                                           | 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 |
| 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 |

|                                                                                           |    |
|-------------------------------------------------------------------------------------------|----|
| <b>RENOVATED UNITS:</b>                                                                   |    |
| All electrical boxes are to be secure in place and not hanging.:                          | Ok |
| Disposal and dishwasher are to be plug in and not hot hard wired.:                        | Ok |
| Do not overload the circuits.:                                                            | Ok |
| Ground wires are to be hook up.:                                                          | Ok |
| Make sure all wires are connected properly and tight and correct wire nut use.:           | Ok |
| No stabbing of wires into the back of outlet, they are to be put around the screw.:       | Ok |
| On GFCI outlets the hot wire goes to the line side on the fixture and not the load side.: | Ok |
| Plastic boxes are not to be surface-mounted, with a utility box.:                         | Ok |

|                                                                    |    |
|--------------------------------------------------------------------|----|
| <b>BATHROOM RENOVATION:</b>                                        |    |
| Install new 1/2 inch ball valves and remove the old gates valves.: | Ok |
| Removal of all sheetrock in the bathroom.:                         | Ok |
| Remove of old drums trap and installing P traps for tub drains.:   | Ok |
| Replace the 1/2 inch copper water lines.:                          | Ok |
| Using 1/2 inch hardi board around the wet area of the tub.:        | Ok |

|          |  |
|----------|--|
| Resident |  |
|----------|--|

|                                                                                    |           |
|------------------------------------------------------------------------------------|-----------|
| Lindy Community Representative Name                                                | Dawn Buck |
|  |           |
| Technician                                                                         | Dawn Buck |
| Resident not available for signature                                               |           |
| Resident refused Signature                                                         |           |