



Move Out Inventory & Condition Form

Inspection Date	Technician	Property	Units
06-02-2025	Jeff Wilson	450 Green Apartments	J202

Approved By	Jeff Wilson
Resident Name	Mary Tamarin
Forwarding Mailing Address	915 Capitol Road Norristown PA 19403
Date Resident Turned in Keys (For evictions - date all belongings were removed)	05-31-2025

Damage Summary				
Main Category	Sub Category	Charges Type	Note	Charges
MISCELLANEOUS	Was personal property left behind?			\$0
MISCELLANEOUS	Was the resident locked out?			\$0
Additional Damage Charges				
broken refrigerator door handle				\$50
stove cleaning				\$50
refrigerator cleaning				\$50
Total Charges				\$150.00

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

DINING ROOM:	
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Ceilings / Lights:	Ok
Walls / Outlets:	Ok
Window:	Ok
Window coverings:	Ok

KITCHEN:	
Is there a FireAvert red box, plug, and solenoid?:	Ok
Date of Installation	2024-01-02

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

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:	Ok

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

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

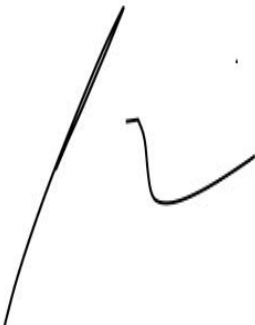
CARPET:	
Burns:	Ok

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
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
If there are sprinkler heads, are they painted?:	Yes
If there are sprinklers, are the sprinkler pipes painted?:	Yes
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

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

Resident	
<div> <div>Lindy Community Representative Name</div> <div>Jeff Wilson</div> </div> <div>  </div> <div> <div>Technician</div> <div>Jeff Wilson</div> </div>	

Resident not available for signature	YES
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