



## Move Out Inventory & Condition Form

Inspection Date	Technician	Property	Units
06-30-2020	John Samuel	Gateway Towers	B314

Resident Name	Rebeca Esteves-Cruz
Forwarding Mailing Address	450 Shurs Lane Philadelphia, PA 19128
Date Resident Turned in Keys	Jun-29-2020

Damage Summary				
Main Category	Sub Category	Charges Type	Note	Charges
MISCELLANEOUS	Removal Of Bulk Items	Replace		\$50.00
MISCELLANEOUS	Mini Blind(s) each	Replace		\$25.00
Additional Damage Charges				
Total Charges				\$75.00

<b>LIVING ROOM:</b>	
Walls / Outlets:	Ok
Ceilings / Lights:	Ok
Window:	Ok
Door / Closet:	Ok
Window coverings:	Ok
Other:	Ok
<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:	Ok
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:	Ok
<b>BEDROOMS:</b>	
Walls / Outlets:	Ok
Ceilings / Lights:	Ok
Floors / Carpet:	Ok
Window:	Ok
Window coverings:	Ok
Door / Closet:	Ok
Other:	Ok
<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:	Ok
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:	Ok
Shampoo 2 Bedroom:	Ok
Stain Removal:	Ok
Burns:	Ok
Deodorize:	Ok
Pet Treatment (Odor):	Ok
Replace Carpet 1 Bedroom:	Ok
Replace Carpet 2 Bedroom:	Ok
<b>MISCELLANEOUS:</b>	

Removal Of Bulk Items:	Not Ok
Charges Type	Replace
Charges	
Comment	Remove sofa



Mini Blind(s) each:	Not Ok
Charges Type	Replace
Charges	
Comment	Replace blinds in living room



<b>OVERALL:</b>	
Signs of Moisture inside the apartment:	Ok
Signs of Moisture outside the apartment:	Ok
Resident	

NA

Lindy Community Representative Name	John Samuel
	
Technician	John Samuel
Resident not available for signature	YES
Resident refused Signature	NO