

## **Move Out Inventory & Condition Form**

| Inspection Date | Technician     | Property      | Units |
|-----------------|----------------|---------------|-------|
| 06-30-2020      | Herbert Turner | Mt. Airy Arms | 310A  |

| Resident Name                | Philip Mohr                               |
|------------------------------|---|
| Forwarding Mailing Address   | 8300 Old Georgetown Rd Bethesda, Md 20814 |
| Date Resident Turned in Keys | Jun-30-2020                               |

| Damage Summary            |              |              |        |         |
|---------------------------|--------------|--------------|--------|---------|
| Main Category             | Sub Category | Charges Type | Note   | Charges |
| Additional Damage Charges |              |              |        |         |
| Total Charges \$0.0       |              |              | \$0.00 |         |

| LIVING ROOM:       |                                 |
|--------------------|---------------------------------|
| Walls / Outlets:   | Ok                              |
| Ceilings / Lights: | Ok                              |
| Window:            | Ok                              |
| Comment            | Needs caulking on outside ledge |



| Door / Closet:    | Ok |
|-------------------|----|
| Window coverings: | Ok |
| Other:            | Ok |

| DINING ROOM:                        |    |
|-------------------------------------|----|
| Walls / Outlets:                    | Ok |
| Ceilings / Lights:                  | Ok |
| Window:                             | Ok |
| Window coverings:                   | Ok |
| KITCHEN:                            |    |
| 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 |
| BEDROOMS:              |    |
| Walls / Outlets:       | Ok |
| Ceilings / Lights:     | Ok |
| Floors / Carpet:       | Ok |
| Window:                | Ok |
| Window coverings:      | Ok |
| Door / Closet:         | Ok |
| Other:                 | Ok |
| BATHROOM:              |    |
| 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 |
| LOCKS:  |    |
| 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 |
| KEYS:   |    |
| Failure To Return Apartment Key:  | Ok |
| Failure To Return Mailbox Key:  | Ok |
| DOORS:  |    |
| Apartment Door:   | Ok |
| Solid Core & Steel:   | Ok |
| Frame:  | Ok |
| Hollow:   | Ok |
| PAINTING:   |    |
| Over Dark Colors (Per Room):  | Ok |
| Holes in Walls (Each Hole):   | Ok |
| Wallpaper Removal (Per Room):   | Ok |
| Border Removal (Per Room):  | Ok |
| CARPET:   |    |
| 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 |
| MISCELLANEOUS:                           |    |
| 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 |
| OVERALL:   |    |
| Signs of Moisture outside the apartment:   | Ok |
| Signs of Moisture inside the apartment:  | Ok |
| Resident   |    |

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|---|----|---|
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Lindy Community Representative Name

| Technician                           | Herbert Turner |
|--------------------------------------|----------------|
| Resident not available for signature | NO             |
| Resident refused Signature           | NO             |

Herbert Turner