

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

Inspection Date	Technician	Property	Units
07-22-2024	Daniel Ortiz	Meadowbrook	961

Approved By	Lori Kolinchak
Resident Name	Diane Krause
Forwarding Mailing Address	247 Lafayette Road, Coatsville, PA 19320
Date Resident Turned in Keys	07-19-2024

	Damage Summary	7		
Main Category	Sub Category	Charges Type	Note	Charges
MISCELLANEOUS	Was personal property left behind?			\$0.00
MISCELLANEOUS	Was the resident locked out?			\$0.00
Additional Damage Charges				
		Total Cl	narges	\$0.00

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

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

KITCHEN:		
Backsplash:		Ol
Cabinets:		
Cabinet Door:	Ok	
Cabinets:		
Cabinet Handle:	Ok	
Cabinets:		
Cabinet Shelf:	Ok	
Ceiling Fan:		Ol
Ceiling Light Fixture:		Ol
Ceiling Lights:		Oł
Cleaning of Stove:		Oł
Counter Top:		Ol
Dishwasher:		Ol
Drip Pan:		Ol
Electric Meter:		Ol
Faucet:		Ol
Faucet Knobs:		Ol
Floors:		Ok
Formica/Tiles:		Ok
Garbage Disposal:		Ok
Kitchen Sink:		Ok
Microwave:		Oł
Other:		Oł
Oven / Range:		Oł
Oven Door Handle:		Oł
Oven Racks:		Oł
Range Top:		Ol

Refrigerator (Freezer):		
Refrigerator (Drawers):	Ok	
Refrigerator (Freezer):		
Refrigerator (Shelf and Bars):	Ok	
Refrigerator (Freezer):		
Refrigerator Crisper Glass/Plastic:	Ok	
Rubber Stopper:		Ok
Stove Knob:		Ok
Verify that either a Fire Stop (under the microwave) or FireAvert (behind the stove) exists.:		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

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:	
TMINING.	

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

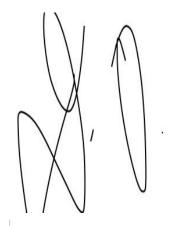
CARPET:	
Burns:	Ok
Deodorize:	Ok
Pet Treatment (Odor):	Ok
Replace Carpet 1 Bedroom:	Ok
Replace Carpet 2 Bedroom:	Ok
Shampoo 1 Bedroom:	Ok
Shampoo 2 Bedroom:	Ok
Stain Removal:	Ok

MISCELLANEOUS:	
Broken Window Glass (Per Pane):	Ok
Cabinet Equipment:	Ok
Carbon Monoxide Detector:	Ok
Cleaning of Apartment:	Ok
Clear Storage Locker:	Ok
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
Date of Installation	2024-07-19
Light Globes:	Ok
Mini Blind(s) each:	N/A
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:	N/A
Vinly Tile Bathroom:	Ok
Vinly Tile Kitchen:	Ok
Was personal property left behind?:	No
Charges Type	
Charges	0
Was the resident locked out?:	No
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	

Daniel Ortiz

Lindy Community Representative Name



Technician	Daniel Ortiz
Resident not available for signature	YES