

Move Out Inventory & Condition Form

| Inspection Date | Technician | Property | Units |
|-----------------|------------|-------------|-------|
| 08-31-2020 | Paul Oneto | Meadowbrook | 901 |

| Resident Name | Inna Perednik |
|------------------------------|---------------|
| Forwarding Mailing Address | Not Available |
| Date Resident Turned in Keys | Not Available |

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

| LIVING ROOM: | |
|--------------------|----|
| Walls / Outlets: | Ok |
| Ceilings / Lights: | Ok |
| Window: | Ok |
| Door / Closet: | Ok |
| Window coverings: | Ok |
| Other: | Ok |
| DINING ROOM: | |
| Walls / Outlets: | Ok |
| Ceilings / Lights: | Ok |
| Window: | Ok |
| Window coverings: | 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 |
| 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 |
| OVERALL: | |
| Signs of Moisture inside the apartment: | Ok |
| Signs of Moisture outside the apartment: | Ok |
| Resident | |
| | |

| Lindy Community Domesontative Name | Davil Onata |
|-------------------------------------|-------------|
| Lindy Community Representative Name | Paul Oneto |

| Technician | Paul Oneto | |
|--------------------------------------|------------|--|
| Resident not available for signature | YES | |
| Resident refused Signature | NO | |