



Move Out Inventory & Condition Form

Inspection Date	Technician	Property	Units
10-11-2024	Kathryn Mason	Academia Suites	S408

Approved By	Kathryn Mason
Resident Name	Yolanda Fowler
Forwarding Mailing Address	1100 W Godfrey Ave s408 Phila PA 29141
Date Resident Turned in Keys	09-30-2024

Damage Summary				
Main Category	Sub Category	Charges Type	Note	Charges
Oven / Range	Oven Cleaning	Clean		\$0.00
KITCHEN	Cleaning of Stove	Clean		\$60.00
MISCELLANEOUS	Was the resident locked out?			\$0.00
Additional Damage Charges				
Total Charges				\$60.00

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

DINING ROOM:	
Ceilings / Lights:	N/A
Walls / Outlets:	N/A
Window:	N/A

Window coverings:	N/A
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KITCHEN:	
Backsplash:	Ok
Cabinets:	
Cabinet Door:	Ok
Cabinets:	
Cabinet Handle:	Ok
Cabinets:	
Cabinet Shelf:	Ok
Ceiling Fan:	N/A
Ceiling Light Fixture:	Ok
Ceiling Lights:	Ok
Cleaning of Stove:	Not Ok
Charges Type	Clean
Charges	
Comment	Clean
	
Counter Top:	Ok
Drip Pan:	Ok
Electric Meter:	N/A
Faucet:	Ok
Faucet Knobs:	Ok
Floors:	Ok
Formica/Tiles:	N/A
Garbage Disposal:	N/A

Kitchen Sink:	Ok
Microwave:	N/A
Other:	N/A

Oven / Range:	
Oven Cleaning:	Not Ok
Charges Type	Clean
Charges	
Comment	Clean

Oven / Range:	
Oven door handle:	Ok

Oven / Range:	
Oven drip pan:	Ok

Oven / Range:	
Oven knobs:	Ok

Oven / Range:	
Oven Racks:	Ok

Oven / Range:	
Range burners:	Ok

Oven / Range:	
Range Hood:	N/A

Oven Door Handle:	Ok
Oven Racks:	Ok

Range Top:	Ok
Rubber Stopper:	N/A
Stove Knob:	Ok
Verify that either a Fire Stop (under the microwave) or FireAvert (behind the stove) exists.:	Ok
Wall Outlets:	Ok
Washer/Dryer:	N/A
Window Coverings:	Ok

BEDROOMS:	
Ceilings / Lights:	N/A
Door / Closet:	N/A
Floors / Carpet:	N/A
Other:	N/A
Walls / Outlets:	N/A
Window:	N/A
Window coverings:	N/A

BATHROOM:	
Cabinets / Mirror:	Ok
Ceiling Lights:	Ok
Cleaning Bathroom:	Ok
Complete Toilet:	Ok
Counter Top:	Ok
Floors:	Ok
Formica /Tile:	N/A
Is there signs of moisture from outside in the apartment?:	Ok
Medicine Cabinet:	Ok
Mirror Cabinet:	Ok
Other:	N/A
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

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.:	N/A		
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?:	Yes		
<table border="1"> <tr> <td>Estimated Value of Personal Property is.</td><td>\$0</td></tr> </table>		Estimated Value of Personal Property is.	\$0
Estimated Value of Personal Property is.	\$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	Yolanda Fowler
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Lindy Community Representative Name	Kathryn Mason
	
Technician	Kathryn Mason
Resident not available for signature	YES