

Move Out Inventory & Condition Form

| Inspection Date | Technician | Property | Units |
|-----------------|-------------|-------------------|-------|
| 11-14-2024 | Thomas Neal | York North (YONO) | 0320 |

| Approved By | Auto Approved |
|------------------------------|------------------------------------|
| Resident Name | Ronald Jones |
| Forwarding Mailing Address | 377 Monte Cristo Quilence Wa 98376 |
| Date Resident Turned in Keys | 11-07-2024 |

| Damage Summary | | | | |
|---------------------------|------------------------|--------------|--------|----------|
| Main Category | Sub Category | Charges Type | Note | Charges |
| Refrigerator (Freezer) | Cleaning Refrigerator | Clean | | \$60.00 |
| BATHROOM | Other | Clean | | \$0.00 |
| BATHROOM | Remove Mildew on Tiles | Clean | | \$100.00 |
| BATHROOM | Sink | Clean | | \$0.00 |
| Additional Damage Charges | | | | |
| | | Total C | harges | \$160.00 |

| 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 | |
|-------------------------------|---|-----|----|
| Window coverings: | | Ok | |
| KITCHEN: | | | |
| Backsplash: | | | Ok |
| Cabinets: | | | |
| Cabinet Door: | 0 | k | |
| Cabinets: | ' | | |
| Cabinets: Cabinet Handle: | | Ok | |
| Cubilict Hundie. | | OK | |
| Cabinets: | | | |
| Cabinet Shelf: | 0 | k | |
| Ceiling Fan: | | | Ok |
| Ceiling Light Fixture: | | | Ok |
| Ceiling Lights: | | | Ok |
| Cleaning of Stove: | | | Ok |
| Counter Top: | | | Ok |
| Dishwasher: | | | |
| Dishwasher Knob: | | N/A | |
| Dishwasher: | | | |
| Dishwasher Rack: | | N/A | |
| Dishwasher: | | | |
| Dishwasher Silverware Holder: | | N/A | |
| Drip Pan: | | | Ok |
| Electric Meter: | | | Ok |
| Faucet: | | | Ok |
| Faucet Knobs: | | | Ok |
| Floors: | | | Ok |
| Formica/Tiles: | | | Ok |
| Garbage Disposal: | | | Ok |
| Kitchen Sink: | | | Ok |
| Microwave: | | | Ok |

| Other: | |
|-------------------|----|
| Oven / Range: | |
| Oven Cleaning: | Ok |
| 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: | Ok |
| ven Door Handle: | |
| ven Racks: | (|
| lange Top: | |

| Refrigerator (Freezer): | |
|-------------------------|--------|
| Cleaning Refrigerator: | Not Ok |
| Charges Type | Clean |
| Charges | |
| Comment | Clean |



| 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.:

| Wall Outlets: | Ok | |
|-------------------|----|--|
| Washer/Dryer: | Ok | |
| Window Coverings: | Ok | |

Ok

| BEDROOMS: | |
|--------------------|-----------------|
| Ceilings / Lights: | Ok |
| Door / Closet: | Ok |
| Floors / Carpet: | Ok |
| Other: | Ok |
| Comment | Left bulk items |

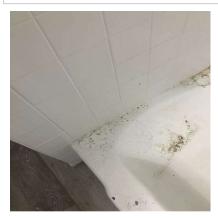


| Walls / Outlets: | Ok |
|-------------------|----|
| Window: | Ok |
| Window coverings: | Ok |

| 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: | Not Ok |
| Charges Type | Clean |
| Charges | |
| Comment | Tub dirty |



| Remove Mildew on Tiles: | Not Ok |
|-------------------------|--------|
| Charges Type | Clean |
| Charges | |
| Comment | Clean |



| Shower Curtain Bar: | Ok |
|---------------------|--------|
| Shower Head: | Ok |
| Sink: | Not Ok |
| Charges Type | Clean |
| Charges | |
| Comment | Dirty |



| Soad Dish (Tub): | Ok |
|----------------------|----|
| Soap Dish (Sink): | Ok |
| Toilet Paper Holder: | Ok |
| Toilet Tank: | Ok |
| Towel Bar: | Ok |
| Tub Knob(s): | 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: | |
|-------------------------------|----|
| 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 |
| 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.: | Ok |
| Date of Installation | 2024-11-14 |
| If there are sprinkler heads, are they painted?: | Yes |
| If there are sprinklers, are the sprinkler pipes painted?: | Yes |
| 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 |
| Window Screen(s) each: | Ok |
| Window Sills: | Ok |

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| | / P K | 4 | |
| | | | |

| Signs of Moisture inside the apartment: | Ok | |
|--|----|--|
| Signs of Moisture outside the apartment: | Ok | |

| Resident Ronald Jones | |
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| Lindy Community Representative Name | Thomas Neal |
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[NA

| Technician | Thomas Neal |
|--------------------------------------|-------------|
| Resident not available for signature | YES |