



Move-in Inventory & Condition Form

Inspection Date: 12-02-2017

Property: Towers at Wyncote

Units: 101-4

CLEANLINESS:

Swept / Mopped: Ok

Closets cleared: Ok

Frig /Stove clean: Ok

No personal items: Ok

Other: Ok

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

KITCHEN:

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
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:

Mirror and Medicine 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

Remove Mildew on Tiles: Ok

Cleaning Bathroom: Ok

Wall Outlets: Ok

Floors: Ok

Cabinets / Mirror: Ok

Window: Ok

Other: Ok

LOCKS:

Door Knob: 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

Solid Core & Steel: Ok

Frame: Ok

Hollow: 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

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

Leasing Agent: Kklklklklklkl

Date: 12-02-2017

A handwritten signature in black ink, consisting of a horizontal line followed by a loop and a small flourish.

Resident not available for signature :

Resident refused Signature :



Move-out Inventory & Condition Form

Inspection Date: 12-03-2017

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Units: 101-4

CLEANLINESS:

Swept / Mopped: Ok

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Swept / Mopped: Ok

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Frig /Stove clean: Ok

Frig /Stove clean: Ok

Frig /Stove clean: Ok

No personal items: Ok

No personal items: Ok

No personal items: Ok

No personal items: Ok

Other: Ok

Other: Ok

Other: Ok

Other: Ok

LIVING ROOM:

Walls / Outlets: Ok

Walls / Outlets: Ok

Walls / Outlets: Ok

Ceilings / Lights: Ok

Ceilings / Lights: Ok

Ceilings / Lights: Ok

Window: Ok

Window: Ok

Window: Ok

Door / Closet: Ok

Door / Closet: Ok

Door / Closet: Ok

Window coverings: Ok

Window coverings: Ok

Window coverings: Ok

Other: Ok

Other: Ok

Other: Ok

DINING ROOM:

Walls / Outlets: Ok

Walls / Outlets: Not Ok

Comment: One

Walls / Outlets: Ok

Ceilings / Lights: Ok

Ceilings / Lights: Not Ok

Comment: Two

Ceilings / Lights: Ok

Window: Ok

Window: Ok

Window coverings: Ok

Window coverings: Ok

Resident: RES

Date: 12-03-2017

A handwritten signature in black ink, consisting of a stylized, cursive script that appears to be a first name followed by a last name.

Leasing Agent: ONNN

Date: 12-03-2017



Resident not available for signature : No

Resident refused Signature : No