



# Move Out Inventory & Condition Form

| Inspection Date | Technician     | Property | Units  |
|-----------------|----------------|----------|--------|
| 01-02-2025      | Melissa Verdon | Enclaves | 3926A4 |

|                              |                  |
|------------------------------|------------------|
| Resident Name                | Peter Hollenbeck |
| Forwarding Mailing Address   | Not Available    |
| Date Resident Turned in Keys | Dec-31-2024      |

| 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:              | Ok |
| Ceiling Fan:           | Ok |
| Ceiling Light Fixture: | Ok |
| Ceiling Lights:        | Ok |
| Cleaning of Stove:     | Ok |
| Counter Top:           | Ok |

|                                                                                               |    |
|-----------------------------------------------------------------------------------------------|----|
| Dishwasher:                                                                                   | Ok |
| 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:                                                                                        | Ok |
| Oven / Range:                                                                                 | Ok |
| Oven Door Handle:                                                                             | Ok |
| Oven Racks:                                                                                   | Ok |
| Range Top:                                                                                    | Ok |
| Refrigerator (Freezer):                                                                       | 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 |

|                                                                           |    |
|---------------------------------------------------------------------------|----|
| <b>LOCKS:</b>                                                             |    |
| 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 |

|                                  |    |
|----------------------------------|----|
| <b>KEYS:</b>                     |    |
| Failure To Return Apartment Key: | Ok |

|                                |    |
|--------------------------------|----|
| Failure To Return Mailbox Key: | Ok |
|--------------------------------|----|

| <b>DOORS:</b>                        |                                                |
|--------------------------------------|------------------------------------------------|
| Apartment Door:                      | Ok                                             |
| Apartment Door closes automatically: | Ok                                             |
| Frame:                               | Ok                                             |
| Hollow:                              | Ok                                             |
| Solid Core & Steel:                  | Not Ok                                         |
| Charges Type                         | Replace                                        |
| Charges                              |                                                |
| Comment                              | Mirror closet door for laundry closet, correct |



| <b>PAINTING:</b>              |    |
|-------------------------------|----|
| Border Removal (Per Room):    | Ok |
| Holes in Walls (Each Hole):   | Ok |
| Over Dark Colors (Per Room):  | Ok |
| Wallpaper Removal (Per Room): | Ok |

| <b>CARPET:</b>            |                               |
|---------------------------|-------------------------------|
| Replace Carpet 1 Bedroom: | Not Ok                        |
| Charges Type              | Replace                       |
| Charges                   |                               |
| Comment                   | Replace master bedroom carpet |



Replace Carpet 2 Bedroom:

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

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:

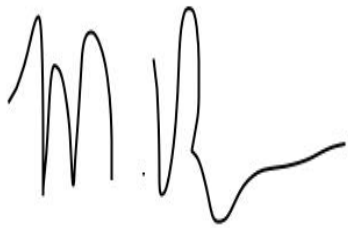
Ok

|                               |    |
|-------------------------------|----|
| Vinly Tile Bathroom:          | Ok |
| Vinly Tile Kitchen:           | Ok |
| Was the resident locked out?: | No |
| Charges Type                  |    |
| Charges                       | 0  |
| Window Screen(s) each:        | Ok |
| Window Sills:                 | Ok |

|                                          |    |
|------------------------------------------|----|
| <b>OVERALL:</b>                          |    |
| Signs of Moisture inside the apartment:  | Ok |
| Signs of Moisture outside the apartment: | Ok |

|          |  |
|----------|--|
| Resident |  |
|----------|--|

|                                     |                |
|-------------------------------------|----------------|
| Lindy Community Representative Name | Melissa Verdon |
|-------------------------------------|----------------|



|                                      |                |
|--------------------------------------|----------------|
| Technician                           | Melissa Verdon |
| Resident not available for signature | YES            |
| Resident refused Signature           | NO             |