

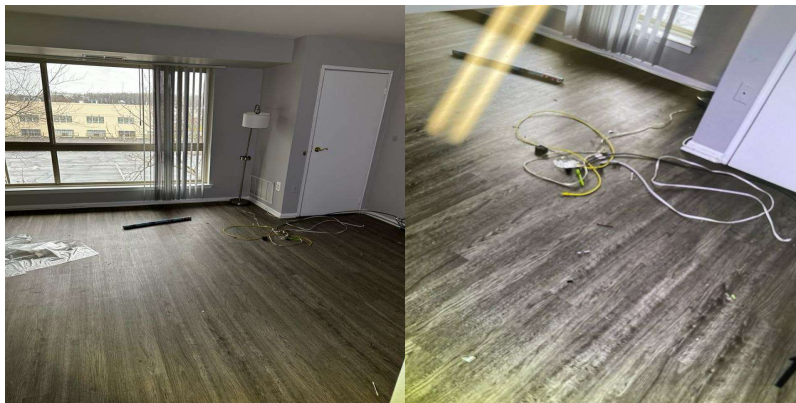


# Move Out Inventory & Condition Form

| Inspection Date | Technician       | Property     | Units |
|-----------------|------------------|--------------|-------|
| 02-06-2024      | Orlando Gonzalez | Joshua House | H0305 |

|                              |               |
|------------------------------|---------------|
| Resident Name                | Ashley Rosser |
| Forwarding Mailing Address   | Not Available |
| Date Resident Turned in Keys | Jan-31-2024   |

| LIVING ROOM:       |                  |
|--------------------|------------------|
| Ceilings / Lights: | Ok               |
| Door / Closet:     | Ok               |
| Other:             | Not Ok           |
| Charges Type       | Clean            |
| Charges            |                  |
| Comment            | Left trash dirty |



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

| DINING ROOM:       |        |
|--------------------|--------|
| Ceilings / Lights: | Ok     |
| Walls / Outlets:   | Not Ok |

|              |        |
|--------------|--------|
| Charges Type | Repair |
| Charges      |        |
| Comment      | Damage |



|                   |    |
|-------------------|----|
| Window:           | Ok |
| Window coverings: | Ok |

|                        |       |
|------------------------|-------|
| <b>KITCHEN:</b>        |       |
| Backsplash:            | Ok    |
| Cabinets:              | Ok    |
| Ceiling Fan:           | Ok    |
| Ceiling Light Fixture: | Ok    |
| Ceiling Lights:        | Ok    |
| Cleaning of Stove:     | Ok    |
| Comment                | Dirty |



|              |    |
|--------------|----|
| Counter Top: | Ok |
|--------------|----|

|                    |    |
|--------------------|----|
| <b>Dishwasher:</b> |    |
| Dishwasher Knob:   | Ok |

|                    |    |
|--------------------|----|
| <b>Dishwasher:</b> |    |
| Dishwasher Rack:   | Ok |

|                               |    |
|-------------------------------|----|
| <b>Dishwasher:</b>            |    |
| Dishwasher Silverware Holder: | 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:            | Not Ok           |
| Charges Type      | Repair           |
| Charges           |                  |
| Comment           | Stickers on wall |

|   |    |
|---|----|
| 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 |

| 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): | Not Ok |
| Charges Type                | Repair |
| Charges                     |        |

|         |                                   |
|---------|-----------------------------------|
| Comment | Lots of holes and damage on walls |
|---------|-----------------------------------|



|                               |               |
|-------------------------------|---------------|
| Over Dark Colors (Per Room):  | Ok            |
| Wallpaper Removal (Per Room): | Not Ok        |
| Charges Type                  | Replace       |
| Charges                       |               |
| Comment                       | Left stickers |





|                           |    |
|---------------------------|----|
| <b>CARPET:</b>            |    |
| 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 |

|                                 |    |
|---------------------------------|----|
| <b>MISCELLANEOUS:</b>           |    |
| 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 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 |  |     |
| 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   | not available    |
|   |                  |
| Lindy Community Representative Name  | Orlando Gonzalez |
|  |                  |
| Technician   | Orlando Gonzalez |
| Resident not available for signature   | YES              |
| Resident refused Signature   | YES              |