

Move Out Inventory & Condition Form

| Inspection Date | Technician | Property | Units |
|-----------------|--------------|--------------|-------|
| 04-07-2022 | Dudlow Blake | Joshua House | F0103 |

| Resident Name | Kyshaun Bygrave |
|------------------------------|-----------------|
| Forwarding Mailing Address | Not Available |
| Date Resident Turned in Keys | Not Available |

| Amenities to be added to this Unit |
|------------------------------------|
| Granite/Quartz Countertops |
| Plank Flooring |
| Black Appliancecs |

| 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: | |
|--------------------|--------|
| Cleaning of Stove: | Not Ok |
| Charges Type | Clean |

| Charges | |
|---------|-----------------|
| Comment | Cleaning needed |



Fire Stops: 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 |

| 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 |

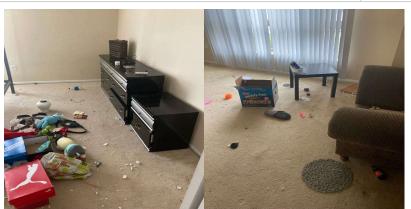
| Wallpaper | Removal | (Per | Room | ١. |
|------------|------------|-------|---------|----|
| vvalipapei | INCITIOVAL | (1 (1 | 1100111 | ,. |

Ok

| CARPET: | |
|---------------------------|---------|
| Replace Carpet 1 Bedroom: | Not Ok |
| Charges Type | Replace |
| Charges | |
| Comment | Replace |



| MISCELLANEOUS: | |
|------------------------|----------|
| Cleaning of Apartment: | Not Ok |
| Charges Type | Clean |
| Charges | |
| Comment | Cleaning |



| Fire extinguisher: | Ok |
|------------------------|-----------------|
| Removal Of Bulk Items: | Not Ok |
| Charges Type | Clean |
| Charges | |
| Comment | Cleaning needed |



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

|--|

Lindy Community Representative Name Dudlow Blake

| Technician | Dudlow Blake |
|--------------------------------------|--------------|
| Resident not available for signature | YES |
| Resident refused Signature | NO |