

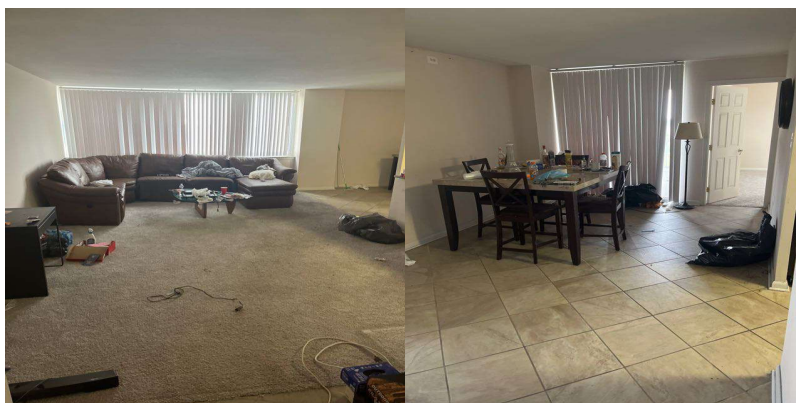


# Move Out Inventory & Condition Form

| Inspection Date | Technician  | Property          | Units  |
|-----------------|-------------|-------------------|--------|
| 05-04-2023      | Josh Kozich | Towers at Wyncote | 0714-3 |

|                              |               |
|------------------------------|---------------|
| Resident Name                | Eric McLaurin |
| Forwarding Mailing Address   | Not Available |
| Date Resident Turned in Keys | May-04-2023   |

|                     |        |
|---------------------|--------|
| <b>LIVING ROOM:</b> |        |
| Ceilings / Lights:  | Ok     |
| Door / Closet:      | Ok     |
| Other:              | Not Ok |
| Charges Type        | Clean  |
| Charges             |        |
| Comment             | Clean  |



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

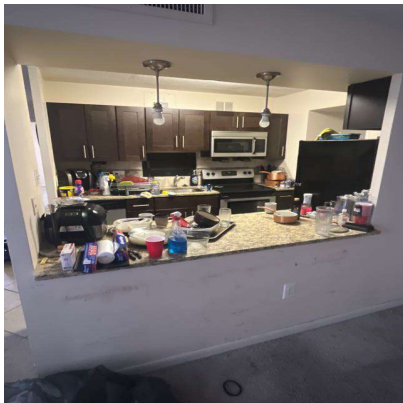
|                     |    |
|---------------------|----|
| <b>DINING ROOM:</b> |    |
| Ceilings / Lights:  | Ok |

|                   |    |
|-------------------|----|
| Plank Flooring:   | Ok |
| Walls / Outlets:  | Ok |
| 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:     | Not Ok |
| Charges Type           | Clean  |
| Charges                |        |
| Comment                | Clean  |



|              |        |
|--------------|--------|
| Counter Top: | Not Ok |
| Charges Type | Clean  |
| Charges      |        |
| Comment      | Clean  |



|                    |  |    |
|--------------------|--|----|
| <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:        | Not Ok |
| Charges Type      | Clean  |
| Charges           |        |
| Comment           | Clean  |

|        |    |
|--------|----|
| Other: | Ok |
|--------|----|

|                      |  |    |
|----------------------|--|----|
| <b>Oven / Range:</b> |  |    |
| Oven Cleaning:       |  | Ok |

|                      |  |    |
|----------------------|--|----|
| <b>Oven / Range:</b> |  |    |
| Oven door handle:    |  | Ok |

| Oven / Range:  |    |
|----------------|----|
| Oven drip pan: | Ok |

| Oven / Range: |    |
|---------------|----|
| Oven knobs:   | Ok |

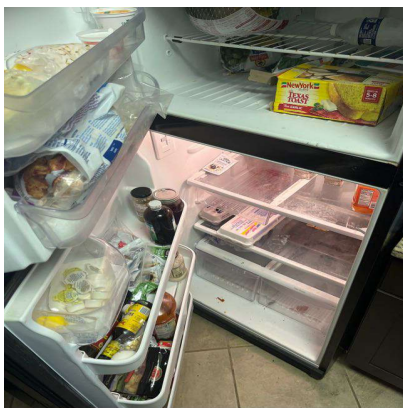
| Oven / Range: |    |
|---------------|----|
| Oven Racks:   | Ok |

| Oven / Range:  |    |
|----------------|----|
| Range burners: | Ok |

| Oven / Range: |    |
|---------------|----|
| Range Hood:   | Ok |

|                   |    |
|-------------------|----|
| Oven Door Handle: | Ok |
| Oven Racks:       | Ok |
| Range Top:        | Ok |

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

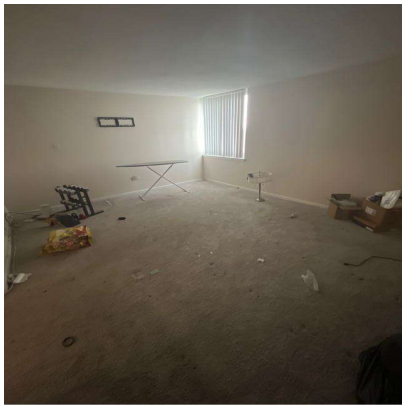


| Refrigerator (Freezer): |    |
|-------------------------|----|
| Refrigerator (Drawers): | Ok |

| Refrigerator (Freezer):        |    |
|--------------------------------|----|
| Refrigerator (Shelf and Bars): | Ok |

| <b>Refrigerator (Freezer):</b>                                                                |    |
|-----------------------------------------------------------------------------------------------|----|
| 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.: | Ok |
| Wall Outlets:                                                                                 | Ok |
| Washer/Dryer:                                                                                 | Ok |
| Window Coverings:                                                                             | Ok |

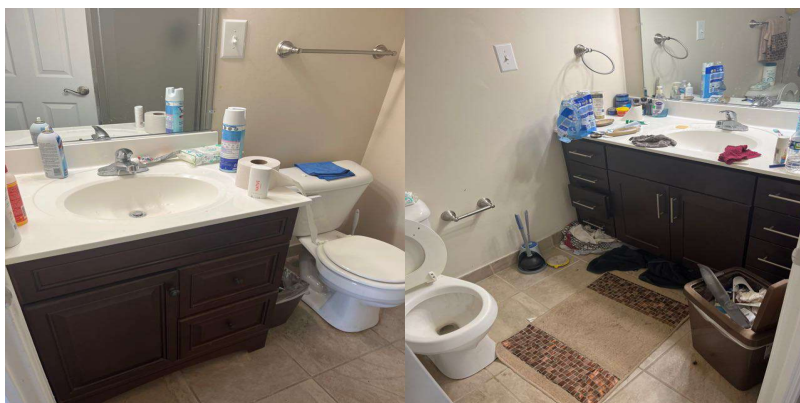
| <b>BEDROOMS:</b>   |        |
|--------------------|--------|
| Ceilings / Lights: | Ok     |
| Door / Closet:     | Ok     |
| Floors / Carpet:   | Ok     |
| Other:             | Not Ok |
| Charges Type       | Clean  |
| Charges            |        |
| Comment            | Clean  |



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

| <b>BATHROOM:</b>   |        |
|--------------------|--------|
| Cabinets / Mirror: | Ok     |
| Ceiling Lights:    | Ok     |
| Cleaning Bathroom: | Not Ok |
| Charges Type       | Clean  |

|         |       |
|---------|-------|
| Charges |       |
| Comment | Clean |



|                                                            |    |
|------------------------------------------------------------|----|
| 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 |
| Plank Flooring:                                            | 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> |  |
|---------------|--|

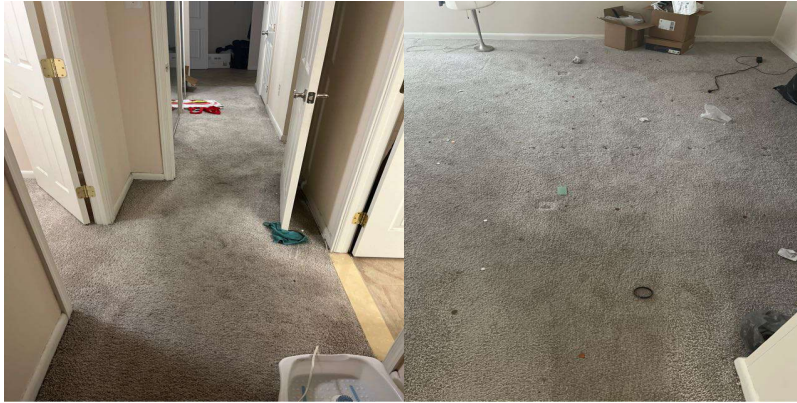
|                                                                           |    |
|---------------------------------------------------------------------------|----|
| Door Knob:                                                                | Ok |
| Door Lock:                                                                | 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 |

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

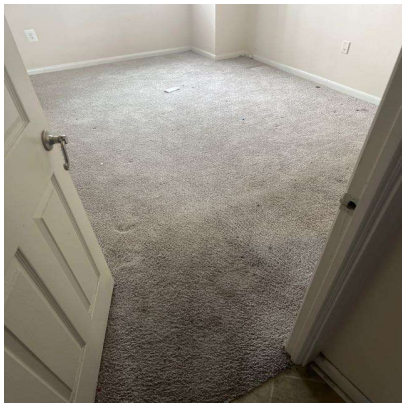
| DOORS:                               |    |
|--------------------------------------|----|
| Apartment Door:                      | Ok |
| Apartment Door closes automatically: | Ok |
| Frame:                               | Ok |
| Hollow:                              | Ok |
| Solid Core & Steel:                  | 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: | Not Ok  |
| Charges Type              | Replace |
| Charges                   |         |
| Comment                   | Replace |



|                           |         |
|---------------------------|---------|
| Replace Carpet 2 Bedroom: | Not Ok  |
| Charges Type              | Replace |
| Charges                   |         |
| Comment                   | Replace |



|                    |    |
|--------------------|----|
| 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                                                                         | 2022-02-04 |
| 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         |

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

|                                      |             |
|--------------------------------------|-------------|
| Resident                             |             |
| <div> <div></div> <div></div> </div> |             |
| Lindy Community Representative Name  | Josh Kozich |



|                                      |             |
|--------------------------------------|-------------|
| Technician                           | Josh Kozich |
| Resident not available for signature | NO          |
| Resident refused Signature           | NO          |