

## **Move Out Inventory & Condition Form**

Inspection Date	Technician	Property	Units
05-04-2024	Dawn Buck	Bromley House	C101

Resident Name	Alisha Brooks
Forwarding Mailing Address	1812 Nolan Street Philadelphia, PA 19138
Date Resident Turned in Keys	May-03-2024

LIVING ROOM:	
Ceilings / Lights:	Ok
Door / Closet:	Ok
Other:	Ok
Walls / Outlets:	Not Ok
Charges Type	Repair
Charges	
Comment	Walls chipped



Window:	Ok
Window coverings:	Not Ok
Charges Type	Replace
Charges	
Comment	Door blind broken



DINING ROOM:	
Ceilings / Lights:	N/A
Walls / Outlets:	N/A
Window:	N/A
Window coverings:	N/A

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

Dishwasher:	
Dishwasher Knob:	Ok

Dishwasher:	
Dishwasher Rack:	Ok

Dishwasher:		
Dishwasher Silverware Holder:	Ok	
Drip Pan:		Ok
Electric Meter:		Ok
Faucet:		Ok
Faucet Knobs:		Ok
Floors:		Ok
Formica/Tiles:		Ok

Garbage Disposal:		Ol
itchen Sink:		Ol
Microwave:		N
Other:		N/
Oven / Range:		
Oven Cleaning:	Ok	
Oven / Range:		
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:		O
Oven Racks:		0
Range Top:		OI

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



Refrigerator (Freezer):	
Refrigerator (Drawers):	Ok

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

Refrigerator (Freezer):	
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:	N/A
Washer/Dryer:	N/A
Window Coverings:	N/A

BEDROOMS:	
Ceilings / Lights:	Ok
Door / Closet:	Ok
Floors / Carpet:	Not Ok
Charges Type	Clean
Charges	
Comment	Stains



Other:	Ok
Walls / Outlets:	Ok
Window:	Ok
Window coverings:	Ok

BATHROOM:	
Cabinets / Mirror:	Ok
Ceiling Lights:	Ok
Cleaning Bathroom:	Not Ok
Charges Type	Clean
Charges	
Comment	Not 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:	N/A
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:	N/A

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:	Not Ok
Charges Type	Replace
Charges	
Comment	Not returned

DOORS:	
Apartment Door:	Ok
Apartment Door closes automatically:	Ok
Frame:	Ok
Hollow:	Ok

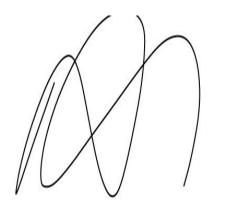
Solid Core & Steel:	Ok	
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PAINTING:	
Border Removal (Per Room):	Ok
Holes in Walls (Each Hole):	Ok
Over Dark Colors (Per Room):	Ok
Wallpaper Removal (Per Room):	Ok

CARPET:	
Burns:	Ok
Deodorize:	Ok
Pet Treatment (Odor):	Ok
Replace Carpet 1 Bedroom:	Ok
Replace Carpet 2 Bedroom:	Ok
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:	N/A
Closet Shelves:	Ok
Common Area damaged during moveout:	Ok
Door Intercom System:	N/A
Exhaust Fan:	Ok
Fan Blades:	N/A
If fire stops have been installed throughout the property, ensure fire stops are installed.:	Ok
Date of Installation	2023-05-04
Light Globes:	N/A
Mini Blind(s) each:	Ok
Outside Lights:	Ok
Phone Jack:	N/A

Rallings:		N/A
Removal Of Bulk Items:		N/A
Remove Debris (Per Bag):		N/A
Sliding Mirror/Glass Door (2):		Ok
Smoke Detector Alarm:		Ok
Stoppage by foreign object in any drain:		Ok
Switch Plate Covers:		N/A
Thermostat Cover:		Ok
Vertical Blinds:		Ok
Vinly Tile Bathroom:		N/A
Vinly Tile Kitchen:		N/A
Was personal property left behind?:		No
Was the resident locked out?:		N/A
Window Screen(s) each:		Ok
Window Sills:		Ok
OVERALL:		
Signs of Moisture inside the apartment:		Ok
Signs of Moisture outside the apartment:		Ok
Resident		
Lindy Community Representative Name	Dawn Buck	



Technician	Dawn Buck
Resident not available for signature	YES
Resident refused Signature	NO