

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

| Inspection Date | Technician | Property             | Units |
|-----------------|------------|----------------------|-------|
| 05-23-2024      | Chima Kanu | 450 Green Apartments | C203  |

| Resident Name                | Tennille Chambers |
|------------------------------|-------------------|
| Forwarding Mailing Address   | Not Available     |
| Date Resident Turned in Keys | May-22-2024       |

| 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:   | Not Ok        |
| Charges Type       | Repair        |
| Charges            |               |
| Comment            | Holes in wall |



| 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:   | Not Ok                    |
| Charges Type   | Replace                   |
| Charges  |                           |
| Comment  | Lindy shower head missing |



| Sink:                | Ok      |
|----------------------|---------|
| Soad Dish (Tub):     | Ok      |
| Soap Dish (Sink):    | Ok      |
| Toilet Paper Holder: | Ok      |
| Toilet Tank:         | Ok      |
| Towel Bar:           | Not Ok  |
| Charges Type         | Replace |
| Charges              |         |
| Comment              | Broken  |



| Tub Knob(s):   | Ok          |
|----------------|-------------|
| Tub Reglazing: | Not Ok      |
| Charges Type   | Repair      |
| Charges        |             |
| Comment        | Tub chipped |



| 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): | Ok |

| CARPET: |  |
|---------|--|
| CARFLI  |  |

| 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:  | 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   | 2024-01-2 |
| If there are sprinkler heads, are they painted?:   | N/A       |
| If there are sprinklers, are the sprinkler pipes painted?:                                   | N/A       |
| 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?: | No |
| Charges Type                        |    |
| Charges                             | 0  |
| Was the resident locked out?:       | No |
| Charges Type                        |    |
| Charges                             | 0  |
| Window Screen(s) each:              | Ok |
| Window Sills:                       | Ok |

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

|--|--|

| Lindy Community Representative Name | Chima Kanu |
|-------------------------------------|------------|
| Lindy Community Representative Name | Chima Kanu |



| Technician                           | Chima Kanu |
|--------------------------------------|------------|
| Resident not available for signature | YES        |
| Resident refused Signature           | NO         |