

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

| Inspection Date | Technician  | Property             | Units |
|-----------------|-------------|----------------------|-------|
| 05-29-2025      | Jeff Wilson | 450 Green Apartments | J306  |

| Resident Name   | CharDaysha Gibbs |
|---|------------------|
| Forwarding Mailing Address  | Not Available    |
| Date Resident Turned in Keys (For evictions - date all belongings were removed) | May-29-2025      |

| 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         |
| Is there a FireAvert red box, plug, and solenoid?: | Ok         |
| Date of Installation                               | 2024-01-28 |
| 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         |
| Wall Outlets:                                      | Ok         |
| Washer/Dryer:                                      | Ok         |
| Window Coverings:                                  | Ok         |

| BEDROOMS:          |         |
|--------------------|---------|
| Ceilings / Lights: | Ok      |
| Door / Closet:     | Ok      |
| Floors / Carpet:   | Not Ok  |
| Charges Type       | Replace |
| Charges            |         |
| Comment            | Stained |



| 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:                                    | Not Ok |
| Charges Type   | Clean  |
| Charges  |        |
| Comment  | Mildew |



| 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:       | Not Ok              |
| Charges Type         | Repair              |
| Charges              |                     |
| Comment              | Tub glaze from leak |



| 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 |

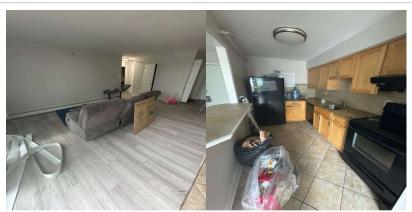
| DOORS:                               |    |
|--------------------------------------|----|
| Apartment Door:                      | Ok |
| Apartment Door closes automatically: | Ok |
| Frame:                               | Ok |
| Hollow:                              | Ok |
| Solid Core & Steel:   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



| 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               |
| If there are sprinkler heads, are they painted?:   | Yes              |
| If there are sprinklers, are the sprinkler pipes painted?:                                   | Yes              |
| Light Globes:  | Ok               |
| Mini Blind(s) each:  | Ok               |
| Outside Lights:  | Ok               |
| Phone Jack:  | Ok               |
| Rallings:  | Ok               |
| Removal Of Bulk Items:   | Not Ok           |
| Charges Type   | Clean            |
| Charges  |                  |
| Comment  | Couch and chairs |



| Remove Debris (Per Bag): | Not Ok          |
|--------------------------|-----------------|
| Charges Type             | Clean           |
| Charges                  |                 |
| Comment                  | 7 bags of trash |



| 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 |
| Estimated Value of Personal Property is. \$0 |     |
|  |     |

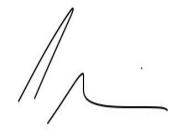
| Was the resident locked out?: | Not Ok |
|-------------------------------|--------|
| Charges Type                  |        |
| Charges                       | 0      |
| Window Screen(s) each:        | Ok     |

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

Ok

| Resident |  |  |  |  |
|----------|--|--|--|--|
|----------|--|--|--|--|

| Lindy Community Representative Name Jeff Wilson |
|---|
|---|



Window Sills:

| Technician                           | Jeff Wilson |
|--------------------------------------|-------------|
| Resident not available for signature | YES         |
| Resident refused Signature           | NO          |