

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

Inspection Date	Technician	Property	Units
06-21-2024	Dawn Buck	Regency House	102

Resident Name	Patrick Rose
Forwarding Mailing Address	Resident vacated no return of keys no forwarding address
Date Resident Turned in Keys	Jun-18-2024

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:	
Cabinet Door:	Ok

Cabinets:	
Cabinet Handle:	Ok

Cabinets:		
Cabinet Shelf:	Ok	
Ceiling Fan:		С
Ceiling Light Fixture:		С
Ceiling Lights:		С
Cleaning of Stove:		C
Counter Top:		С
Dishwasher:		
Dishwasher Knob:	N/A	
Dishwasher:		
Dishwasher Rack:	N/A	
Dishwasher:		
Dishwasher Silverware Holder:	N	/A
Drip Pan:		C
Electric Meter:		C
Faucet:		C
Faucet Knobs:		C
Floors:		C
Formica/Tiles:		N
Garbage Disposal:		N
Kitchen Sink:		C
Microwave:		C
Other:		C
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

Range Hoo	od:	Ok
Oven Door H	Handle:	Ok
Oven Racks	:	Ok
Range Top:		Ok

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



Oven / Range:

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:	Ok

BEDROOMS:	
Ceilings / Lights:	Ok
Door / Closet:	Ok
Floors / Carpet:	Ok
Other:	Ok
Walls / Outlets:	Not Ok
Charges Type	Repair
Charges	
Comment	Hole in wall



Window:	Ok
Window coverings:	Ok

BATHROOM:	
Cabinets / Mirror:	N/A
Ceiling Lights:	Ok
Cleaning Bathroom:	Ok
Complete Toilet:	Ok
Counter Top:	Ok
Floors:	Ok
Formica /Tile:	N/A

Medicine Cabinet:	Not Ok
Charges Type	Repair
Charges	
Comment	Marker written all over



Mirror Cabinet:	N/A
Other:	N/A
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:	N/A
Tub Knob(s):	Ok
Tub Reglazing:	N/A
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:	Not Ok
Charges Type	Replace
Charges	
Comment	Not returned
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

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:	N/A
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	2023-06-21
Light Globes:	Ok
Mini Blind(s) each:	Ok
Outside Lights:	N/A
Phone Jack:	Ok
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:	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
Resident		
Lindy Community Representative Name	Dawn Buck	
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Lindy Community Representative Name	Dawn Buck	
Lindy Community Representative Name  Technician	Dawn Buck  Dawn Buck	

NO

Resident refused Signature