



# Move Out Inventory & Condition Form

| Inspection Date | Technician   | Property    | Units |
|-----------------|--------------|-------------|-------|
| 07-01-2024      | Daniel Ortiz | Meadowbrook | 813   |

|                              |                |
|------------------------------|----------------|
| Resident Name                | Kathi Ginsberg |
| Forwarding Mailing Address   | Not Available  |
| Date Resident Turned in Keys | Jun-29-2024    |

| 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:        | Not Ok                                             |
| Charges Type      | Replace                                            |
| Charges           |                                                    |
| Comment           | Was left dirty and with scratches on the glass top |



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



| 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:                                                                                 | Ok |
| Washer/Dryer:                                                                                 | Ok |
| Window Coverings:                                                                             | Ok |

| BEDROOMS:          |    |
|--------------------|----|
| Ceilings / Lights: | Ok |
| Door / Closet:     | Ok |
| Floors / Carpet:   | Ok |
| Other:             | 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            | Bathroom was left dirty |



|                  |                                                            |
|------------------|------------------------------------------------------------|
| Complete Toilet: | Ok                                                         |
| Counter Top:     | Not Ok                                                     |
| Charges Type     | Replace                                                    |
| Charges          |                                                            |
| Comment          | Was left dirty and some type of burnt mark on the sink top |



|                                                            |    |
|------------------------------------------------------------|----|
| Floors:                                                    | Ok |
| Formica /Tile:                                             | Ok |
| Is there signs of moisture from outside in the apartment?: | Ok |
| Other:                                                     | Ok |

|                         |     |
|-------------------------|-----|
| Remove Mildew on Tiles: | Ok  |
| Shower Curtain Bar:     | Ok  |
| Shower Head:            | Ok  |
| Soad Dish (Tub):        | N/A |
| Soap Dish (Sink):       | Ok  |
| Toilet Paper Holder:    | Ok  |
| Towel Bar:              | Ok  |
| Tub Knob(s):            | Ok  |
| Tub Reglazing:          | 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 |

| <b>KEYS:</b>                     |    |
|----------------------------------|----|
| Failure To Return Apartment Key: | Ok |
| Failure To Return Mailbox Key:   | Ok |

| <b>DOORS:</b>                        |    |
|--------------------------------------|----|
| Apartment Door:                      | Ok |
| Apartment Door closes automatically: | Ok |
| Frame:                               | Ok |
| Hollow:                              | Ok |
| Solid Core & Steel:                  | Ok |

| <b>PAINTING:</b>              |    |
|-------------------------------|----|
| 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: | N/A |
| Shampoo 1 Bedroom:        | Ok  |
| Shampoo 2 Bedroom:        | Ok  |
| Stain Removal:            | Ok  |

| MISCELLANEOUS:                  |                                        |
|---------------------------------|----------------------------------------|
| Broken Window Glass (Per Pane): | Ok                                     |
| Cabinet Equipment:              | Ok                                     |
| Carbon Monoxide Detector:       | N/A                                    |
| Cleaning of Apartment:          | Not Ok                                 |
| Charges Type                    | Clean                                  |
| Charges                         |                                        |
| Comment                         | Unit was left dirty with a smell to it |

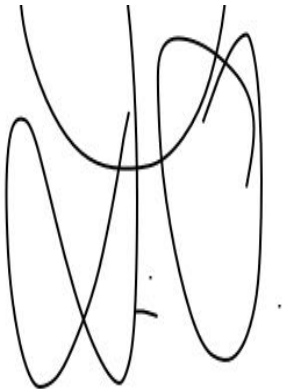


|                                                                                              |            |
|----------------------------------------------------------------------------------------------|------------|
| Clear Storage Locker:                                                                        | Ok         |
| Closet Shelves:                                                                              | Ok         |
| Common Area damaged during moveout:                                                          | Ok         |
| Door Intercom System:                                                                        | N/A        |
| Exhaust Fan:                                                                                 | Ok         |
| Fan Blades:                                                                                  | Ok         |
| If fire stops have been installed throughout the property, ensure fire stops are installed.: | Ok         |
| Date of Installation                                                                         | 2024-06-29 |

|                                          |     |
|------------------------------------------|-----|
| Light Globes:                            | Ok  |
| Mini Blind(s) each:                      | N/A |
| 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:                         | N/A |
| Vinly Tile Bathroom:                     | N/A |
| Vinly Tile Kitchen:                      | N/A |
| 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                                                | Daniel Ortiz |
|  |              |
| Technician                                                                         | Daniel Ortiz |
| Resident not available for signature                                               | YES          |
| Resident refused Signature                                                         | NO           |