



# Move Out Inventory & Condition Form

| Inspection Date | Technician    | Property          | Units |
|-----------------|---------------|-------------------|-------|
| 07-09-2024      | Shawn Hargett | York North (YONO) | 1103  |

|                              |               |
|------------------------------|---------------|
| Resident Name                | Parvesh Paul  |
| Forwarding Mailing Address   | Not Available |
| Date Resident Turned in Keys | Jun-30-2024   |

| LIVING ROOM:       |                          |
|--------------------|--------------------------|
| Ceilings / Lights: | Ok                       |
| Door / Closet:     | Ok                       |
| Other:             | Not Ok                   |
| Charges Type       | Clean                    |
| Charges            |                          |
| Comment            | The apt was left trashed |



|                   |    |
|-------------------|----|
| Walls / Outlets:  | Ok |
| Window:           | Ok |
| Window coverings: | Ok |

| DINING ROOM:       |    |
|--------------------|----|
| Ceilings / Lights: | Ok |
| Walls / Outlets:   | Ok |

|                   |    |
|-------------------|----|
| Window:           | Ok |
| Window coverings: | Ok |

|                        |             |
|------------------------|-------------|
| <b>KITCHEN:</b>        |             |
| Backsplash:            | Ok          |
| <b>Cabinets:</b>       |             |
| Cabinet Door:          | Ok          |
| <b>Cabinets:</b>       |             |
| Cabinet Handle:        | Ok          |
| <b>Cabinets:</b>       |             |
| Cabinet Shelf:         | Ok          |
| Ceiling Fan:           | Ok          |
| Ceiling Light Fixture: | Ok          |
| Ceiling Lights:        | Ok          |
| Cleaning of Stove:     | Not Ok      |
| Charges Type           | Clean       |
| Charges                |             |
| Comment                | Stove dirty |



|                    |    |
|--------------------|----|
| Counter Top:       | Ok |
| <b>Dishwasher:</b> |    |
| Dishwasher Knob:   | Ok |
| <b>Dishwasher:</b> |    |
| Dishwasher Rack:   | Ok |

|                                                                                    |  |        |
|------------------------------------------------------------------------------------|--|--------|
| <b>Dishwasher:</b>                                                                 |  |        |
| Dishwasher Silverware Holder:                                                      |  | Ok     |
| Drip Pan:                                                                          |  | Ok     |
| Electric Meter:                                                                    |  | Ok     |
| Faucet:                                                                            |  | Ok     |
| Faucet Knobs:                                                                      |  | Ok     |
| Floors:                                                                            |  | Not Ok |
| Charges Type                                                                       |  | Clean  |
| Charges                                                                            |  |        |
| Comment                                                                            |  | Dirty  |
|  |  |        |
| Formica/Tiles:                                                                     |  | Ok     |
| Garbage Disposal:                                                                  |  | Ok     |
| Kitchen Sink:                                                                      |  | Ok     |
| Microwave:                                                                         |  | Ok     |
| Other:                                                                             |  | Ok     |
| <b>Oven / Range:</b>                                                               |  |        |
| Oven Cleaning:                                                                     |  | Ok     |
| <b>Oven / Range:</b>                                                               |  |        |
| Oven door handle:                                                                  |  | Ok     |
| <b>Oven / Range:</b>                                                               |  |        |
| Oven drip pan:                                                                     |  | Ok     |

| Oven / Range: |                                  |
|---------------|----------------------------------|
| Oven knobs:   | Not Ok                           |
| Charges Type  | Replace                          |
| Charges       |                                  |
| Comment       | It was burnt on the top of range |



| Oven / Range: |    |
|---------------|----|
| Oven Racks:   | Ok |

| Oven / Range:  |    |
|----------------|----|
| Range burners: | Ok |

| Oven / Range: |    |
|---------------|----|
| Range Hood:   | Ok |

|                                                                                               |    |
|-----------------------------------------------------------------------------------------------|----|
| Oven Door Handle:                                                                             | Ok |
| Oven Racks:                                                                                   | Ok |
| Range Top:                                                                                    | 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 |

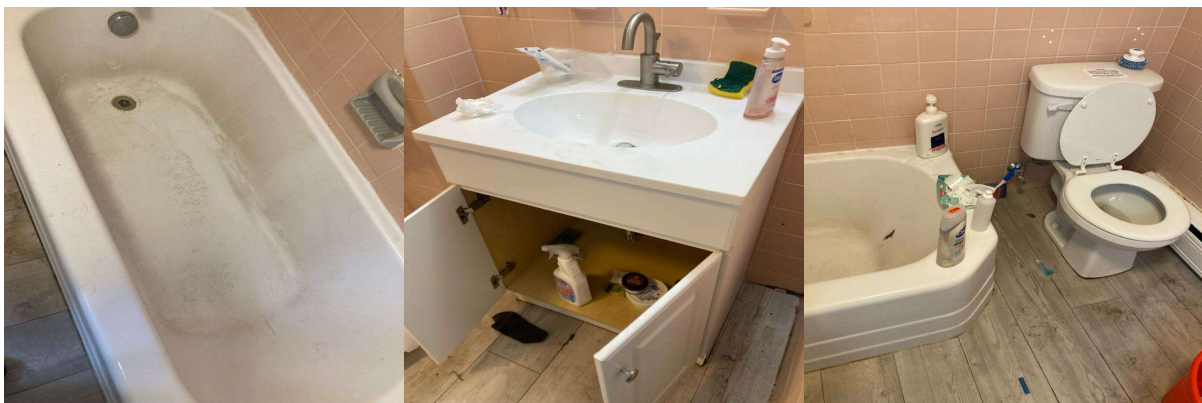
| BEDROOMS:          |    |
|--------------------|----|
| Ceilings / Lights: | Ok |
| Door / Closet:     | Ok |
| Floors / Carpet:   | Ok |

|              |        |
|--------------|--------|
| Other:       | Not Ok |
| Charges Type | Clean  |
| Charges      |        |
| Comment      | Dirty  |



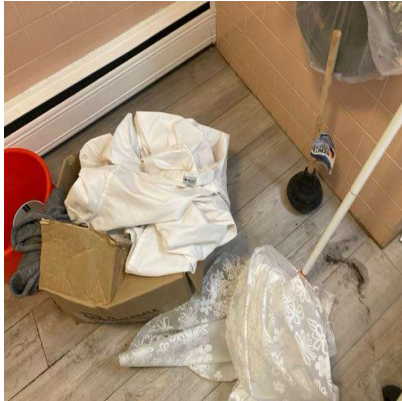
|                   |    |
|-------------------|----|
| Walls / Outlets:  | Ok |
| Window:           | Ok |
| Window coverings: | Ok |

| <b>BATHROOM:</b>   |        |
|--------------------|--------|
| Cabinets / Mirror: | Ok     |
| Ceiling Lights:    | Ok     |
| Cleaning Bathroom: | Not Ok |
| Charges Type       | Clean  |
| Charges            |        |
| Comment            | Dirty  |



|                  |    |
|------------------|----|
| 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:                                                     | Not Ok           |
| Charges Type                                               | Clean            |
| Charges                                                    |                  |
| Comment                                                    | Trash everywhere |



|                         |    |
|-------------------------|----|
| 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:                 | 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 |

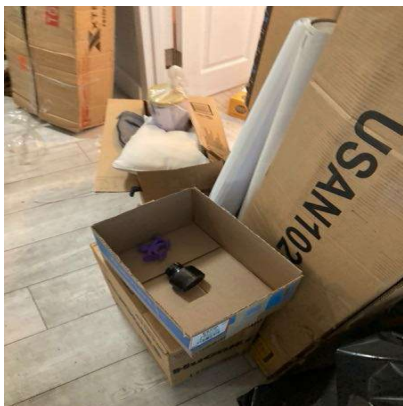
|                                      |    |
|--------------------------------------|----|
| <b>DOORS:</b>                        |    |
| Apartment Door:                      | Ok |
| Apartment Door closes automatically: | Ok |
| Frame:                               | Ok |
| Hollow:                              | 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 |

|                           |    |
|---------------------------|----|
| <b>CARPET:</b>            |    |
| 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 |

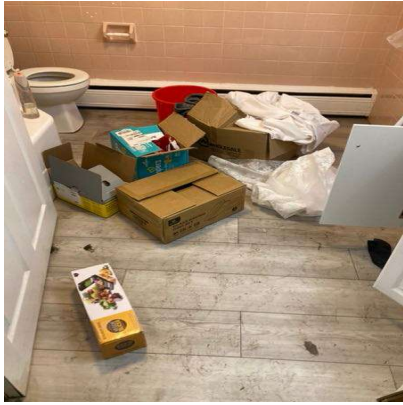
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|---------------------------------|----|
| <b>MISCELLANEOUS:</b>           |    |
| Broken Window Glass (Per Pane): | Ok |
| Cabinet Equipment:              | Ok |
| Carbon Monoxide Detector:       | Ok |
| Cleaning of Apartment:          | Ok |
| 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  |
| 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:                                                                       | 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?:                                                          | Yes |



Comment: Trash

Est Value: \$



Comment: Trash

Est Value: \$



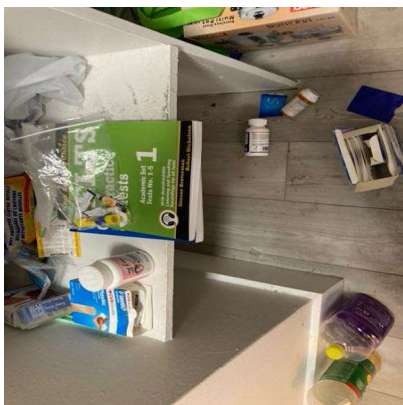
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Est Value: \$



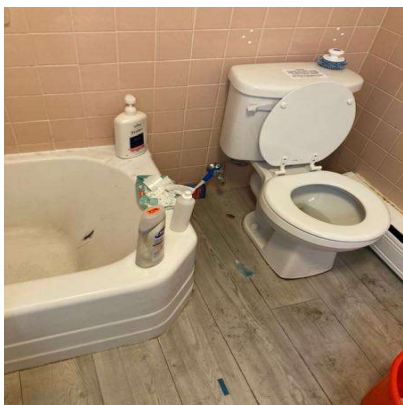
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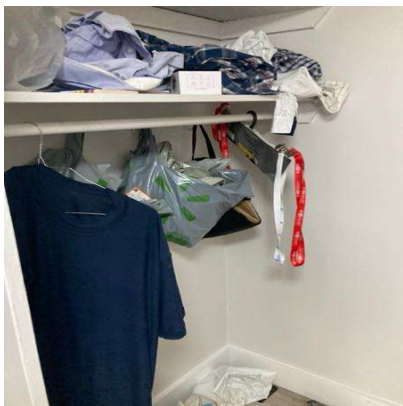
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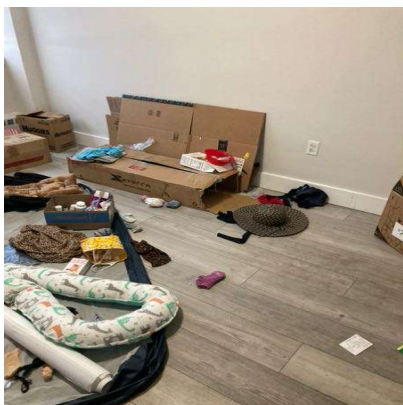
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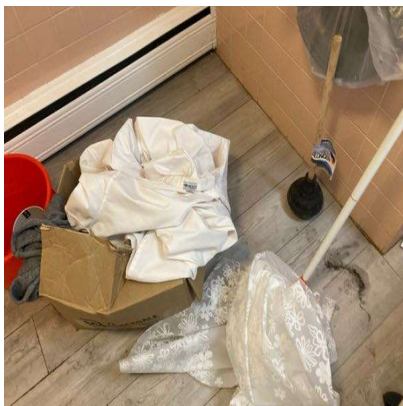
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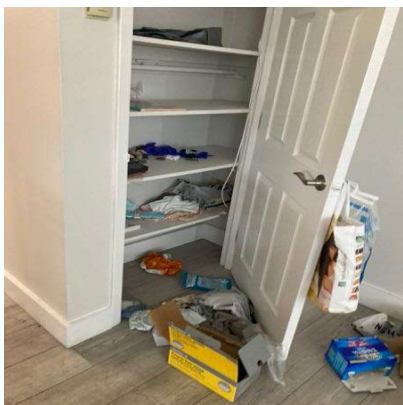
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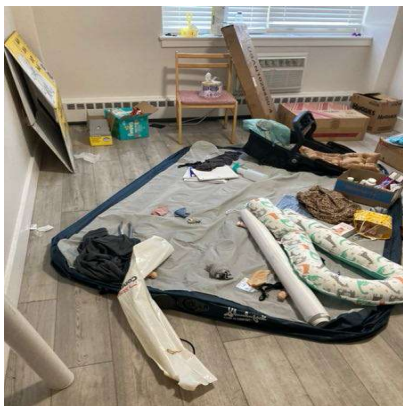
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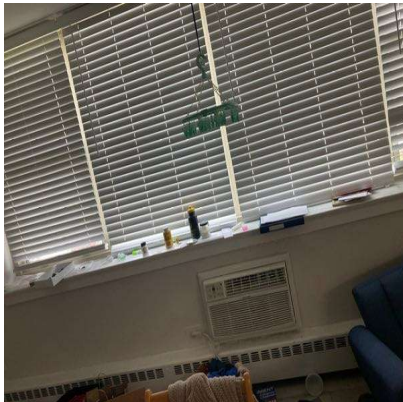
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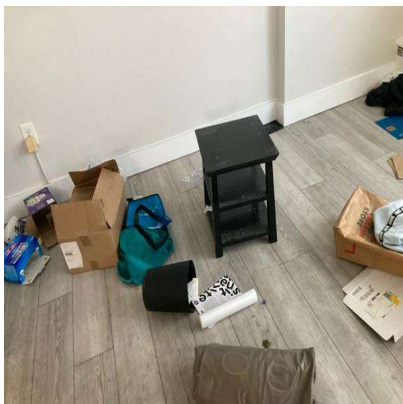
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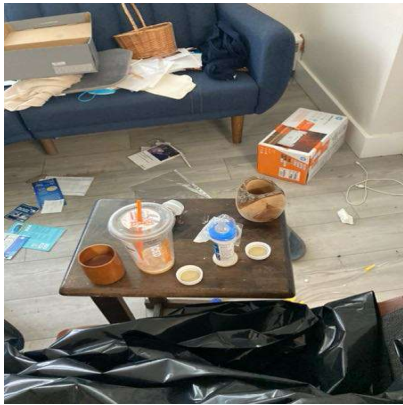
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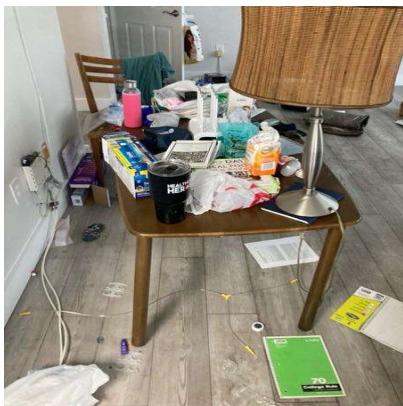
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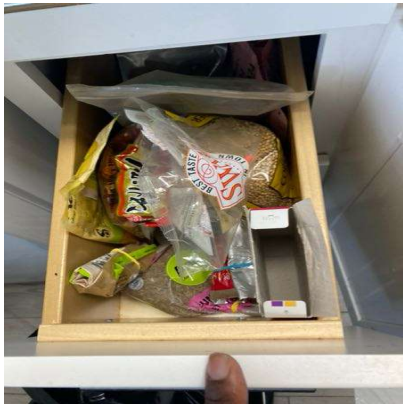
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Est Value: \$

|                                                                                     |               |
|-------------------------------------------------------------------------------------|---------------|
| Estimated Value of Personal Property is.                                            | \$0           |
| Was the resident locked out?:                                                       | No            |
| Charges Type                                                                        |               |
| Charges                                                                             | 0             |
| Window Screen(s) each:                                                              | Ok            |
| Window Sills:                                                                       | Ok            |
| <b>OVERALL:</b>                                                                     |               |
| Signs of Moisture inside the apartment:                                             | Ok            |
| Signs of Moisture outside the apartment:                                            | Ok            |
| Resident                                                                            |               |
|  |               |
| Lindy Community Representative Name                                                 | Shawn Hargett |
| Technician                                                                          | Shawn Hargett |
| Resident not available for signature                                                | YES           |
| Resident refused Signature                                                          | NO            |