



# Move Out Inventory & Condition Form

Inspection Date	Technician	Property	Units
07-31-2024	Kathryn Mason	Academia Suites	G106

Resident Name	Jeffrey Fulton
Forwarding Mailing Address	None provided
Date Resident Turned in Keys	Jul-28-2024

LIVING ROOM:	
Ceilings / Lights:	Ok
Door / Closet:	Ok
Other:	N/A
Walls / Outlets:	Ok
Window:	Ok
Window coverings:	Ok

KITCHEN:	
Backsplash:	Ok
Ceiling Fan:	N/A
Ceiling Light Fixture:	Ok
Ceiling Lights:	Ok
Cleaning of Stove:	Ok
Counter Top:	Ok
Drip Pan:	Ok
Electric Meter:	N/A
Faucet Knobs:	Ok
Floors:	Not Ok
Charges Type	Clean
Charges	
Comment	Should be able to clean



Formica/Tiles:	Not Ok
Charges Type	Repair
Charges	
Comment	Cabinets damaged



Garbage Disposal:	N/A
Kitchen Sink:	Ok
Microwave:	N/A
Other:	N/A

<b>Oven / Range:</b>	
Oven Cleaning:	Ok

<b>Oven / Range:</b>	
Oven door handle:	Ok

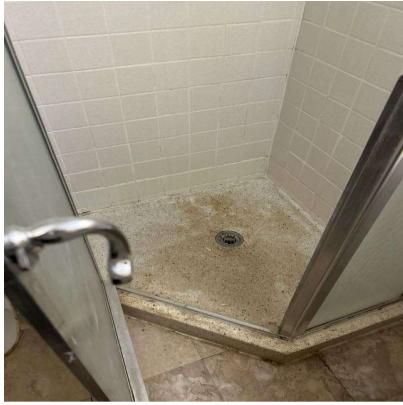
<b>Oven / Range:</b>	
Oven drip pan:	Ok

<b>Oven / Range:</b>	
Oven knobs:	Ok

<b>Oven / Range:</b>	
Oven Racks:	Ok
<b>Oven / Range:</b>	
Range burners:	Ok
<b>Oven / Range:</b>	
Range Hood:	Ok
Oven Door Handle:	Ok
Oven Racks:	Ok
Range Top:	Ok
Rubber Stopper:	N/A
Stove Knob:	Ok
Verify that either a Fire Stop (under the microwave) or FireAvert (behind the stove) exists.:	Ok
Wall Outlets:	Ok
Washer/Dryer:	N/A
Window Coverings:	Ok

<b>BEDROOMS:</b>	
Ceilings / Lights:	N/A
Door / Closet:	N/A
Floors / Carpet:	N/A
Other:	N/A
Walls / Outlets:	N/A
Window:	N/A
Window coverings:	N/A


<b>BATHROOM:</b>	
Cabinets / Mirror:	Ok
Ceiling Lights:	N/A
Cleaning Bathroom:	Not Ok
Charges Type	Clean
Charges	
Comment	Clean



Counter Top:	Ok
Floors:	Ok
Formica /Tile:	N/A
Is there signs of moisture from outside in the apartment?:	Ok
Medicine Cabinet:	Ok
Mirror Cabinet:	Ok
Other:	N/A
Remove Mildew on Tiles:	Ok
Shower Curtain Bar:	N/A
Shower Head:	Ok
Soad Dish (Tub):	N/A
Soap Dish (Sink):	N/A
Toilet Paper Holder:	Not Ok
Charges Type	Repair
Charges	
Comment	Repair



Toilet Tank:	Not Ok
Charges Type	Repair
Charges	

Comment	No water
	
Towel Bar:	N/A
Tub Knob(s):	N/A
Tub Reglazing:	N/A
Vanity Cabinet:	Ok
Wall Outlets:	N/A
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

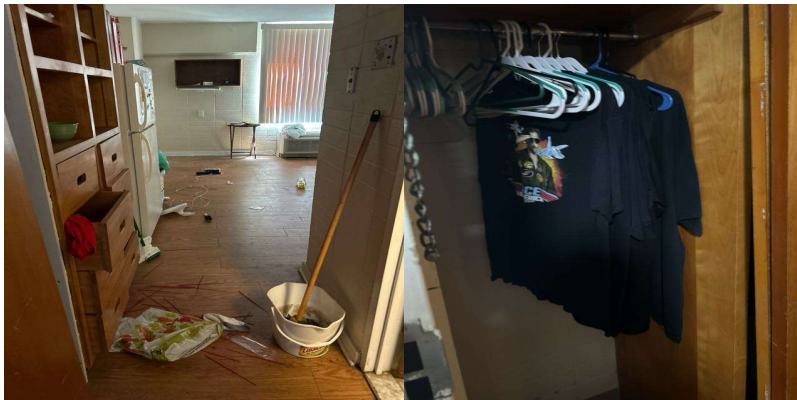
CARPET:	
Deodorize:	N/A
Pet Treatment (Odor):	N/A
Replace Carpet 1 Bedroom:	N/A
Replace Carpet 2 Bedroom:	N/A
Shampoo 1 Bedroom:	N/A
Shampoo 2 Bedroom:	N/A
Stain Removal:	N/A

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
Light Globes:	Ok
Mini Blind(s) each:	Ok
Outside Lights:	Ok
Phone Jack:	Ok
Rallings:	Ok
Removal Of Bulk Items:	Ok

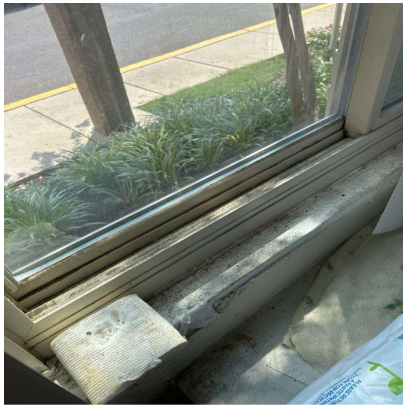


Remove Debris (Per Bag):	Ok
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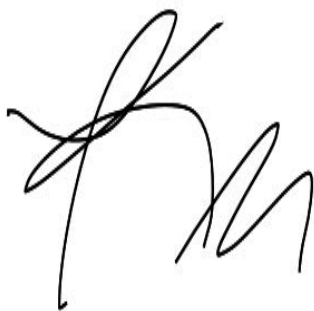


Sliding Mirror/Glass Door (2):	Ok
Smoke Detector Alarm:	Ok
Stoppage by foreign object in any drain:	Ok
Switch Plate Covers:	Ok

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



Resident	Jeffrey Fulton
Lindy Community Representative Name	Kathryn Mason



Technician	Kathryn Mason
Resident not available for signature	YES
Resident refused Signature	NO