

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

| <b>Inspection Date</b> | Technician       | Property    | Units |
|------------------------|------------------|-------------|-------|
| 08-01-2020             | Margaret Fantini | Meadowbrook | 167   |

| Resident Name                | Model Unit  |
|------------------------------|-------------|
| Forwarding Mailing Address   | Test        |
| Date Resident Turned in Keys | Aug-01-2020 |

| LIVING ROOM:       |       |
|--------------------|-------|
| Walls / Outlets:   | Ok    |
| Ceilings / Lights: | Ok    |
| Window:            | Ok    |
| Door / Closet:     | Ok    |
| Window coverings:  | Ok    |
| Other:             | Ok    |
| DINING ROOM:       |       |
| Walls / Outlets:   | Ok    |
| Ceilings / Lights: | Ok    |
| Window:            | Ok    |
| Window coverings:  | Ok    |
| Resident           | OldTe |





| Technician                           | Margaret Fantini |
|--------------------------------------|------------------|
| Resident not available for signature | NO               |
| Resident refused Signature           | NO               |