



# Move Out Inventory & Condition Form

Inspection Date	Technician	Property	Units
08-02-2023	Dudlow Blake	Joshua House	L1010

Resident Name	Ashley Jones
Forwarding Mailing Address	Not Available
Date Resident Turned in Keys	Aug-02-2023

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:	
Verify that either a Fire Stop (under the microwave) or FireAvert (behind the stove) exists.:	Ok

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
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<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

<b>MISCELLANEOUS:</b>	
If fire stops have been installed throughout the property, ensure fire stops are installed.:	Ok
Date of Installation	2022-08-02

<b>OVERALL:</b>	
Signs of Moisture inside the apartment:	Ok
Signs of Moisture outside the apartment:	Ok

Resident	
Lindy Community Representative Name	Dudlow Blake
	
Technician	Dudlow Blake
Resident not available for signature	YES
Resident refused Signature	NO