



# Move Out Inventory & Condition Form

| Inspection Date | Technician   | Property   | Units |
|-----------------|--------------|------------|-------|
| 08-15-2024      | David Beatty | 251 Dekalb | EPH20 |

|                              |                 |
|------------------------------|-----------------|
| Resident Name                | Tian Richardson |
| Forwarding Mailing Address   | Not Available   |
| Date Resident Turned in Keys | Aug-15-2024     |

|                     |   |
|---------------------|---|
| <b>LIVING ROOM:</b> |   |
| Ceilings / Lights:  | Ok  |
| Door / Closet:      | Not Ok  |
| Charges Type        | Repair  |
| Charges             |   |
| Comment             | Sliding door closet track look like it was ripped off |



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

|                     |    |
|---------------------|----|
| <b>DINING ROOM:</b> |    |
| Ceilings / Lights:  | Ok |
| Walls / Outlets:    | Ok |

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

| <b>KITCHEN:</b>        |  |
|------------------------|--|
| Backsplash:            | Ok   |
| Cabinets:              | Ok   |
| Ceiling Fan:           | Ok   |
| Ceiling Light Fixture: | Ok   |
| Ceiling Lights:        | Ok   |
| Cleaning of Stove:     | Ok   |
| Counter Top:           | Not Ok                                     |
| Charges Type           | Repair                                     |
| Charges                |  |
| Comment                | Countertop need to be re-caulked and reset |



|                   |    |
|-------------------|----|
| 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:        | Ok |

| Refrigerator (Freezer): |   |
|-------------------------|---|
| Cleaning Refrigerator:  | Not Ok                                  |
| Charges Type            | Clean                                   |
| Charges                 |   |
| Comment                 | Refrigerator and freezer needs cleaning |



| 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>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 |

| <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 |
| 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 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 | David Beatty |
|-------------------------------------|--------------|



|                                      |              |
|--------------------------------------|--------------|
| Technician                           | David Beatty |
| Resident not available for signature | YES          |
| Resident refused Signature           | NO           |