

Move Out Inventory & Condition Form

| Inspection Date | Technician | Property | Units |
|-----------------|-------------|----------|--------|
| 08-23-2022 | Gregg Smith | Enclaves | 3908B1 |

| Resident Name | Joanna Kindt |
|------------------------------|---------------|
| Forwarding Mailing Address | Not Available |
| Date Resident Turned in Keys | Not Available |

| LIVING ROOM: | |
|--------------------|--------|
| Ceilings / Lights: | Ok |
| Other: | Not Ok |
| Charges Type | Clean |
| Charges | |
| Comment | Dirty |



| Walls / Outlets: | Ok |
|-------------------|-------------------------|
| Window: | Ok |
| Window coverings: | Not Ok |
| Charges Type | Replace |
| Charges | |
| Comment | Broken and doesn't turn |



| DINING ROOM: | |
|--------------------|---------|
| Ceilings / Lights: | Ok |
| Walls / Outlets: | Ok |
| Window: | Ok |
| Window coverings: | Not Ok |
| Charges Type | Replace |
| Charges | |
| Comment | Broken |



| KITCHEN: | |
|--------------|--------|
| Backsplash: | Ok |
| Ceiling Fan: | Not Ok |
| Charges Type | Clean |
| Charges | |
| Comment | Dirty |



| Ceiling Light Fixture: | Ok |
|------------------------|-------------|
| Ceiling Lights: | Ok |
| Cleaning of Stove: | Not Ok |
| Charges Type | Clean |
| Charges | |
| Comment | Rotten food |



| Counter Top: | Not Ok |
|--------------|---------------------------------|
| Charges Type | Replace |
| Charges | |
| Comment | Damaged from water and swelling |



| Dishwasher: | |
|------------------|----|
| Dishwasher Knob: | Ok |

| Dishwasher: | |
|------------------|----|
| Dishwasher Rack: | Ok |

| Dishwasher: | |
|-------------------------------|----|
| Dishwasher Silverware Holder: | Ok |
| | |

| Drip Pan: | Ok |
|-----------------|----------|
| Electric Meter: | Ok |
| Faucet: | Not Ok |
| Charges Type | Replace |
| Charges | |
| Comment | I broken |



| Faucet Knobs: | Not Ok |
|---------------|---------|
| Charges Type | Replace |
| Charges | |
| Comment | Broken |



| Charges Type | Clean |
|--------------|-------|
| Charges | |
| Comment | Dirty |



| Formica/Tiles: | Ok |
|-------------------|---------|
| Garbage Disposal: | Not Ok |
| Charges Type | Replace |
| Charges | |
| Comment | Jammed |



| Kitchen Sink: | Ok |
|---------------|--------|
| Microwave: | Not Ok |
| Charges Type | Clean |
| Charges | |
| Comment | Dirty |



Other: Ok

| Oven / Range: | |
|----------------|---------------------|
| Oven Cleaning: | Not Ok |
| Charges Type | Replace |
| Charges | |
| Comment | Rotten food in oven |



| Oven / Range: | |
|-------------------|----|
| Oven door handle: | Ok |

| Oven / Range: | |
|----------------|----|
| Oven drip pan: | Ok |

| Oven / Range: | |
|---------------|----|
| Oven knobs: | Ok |

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

| Oven / Range: | |
|----------------|-------------|
| Range burners: | Not Ok |
| Charges Type | Replace |
| Charges | |
| Comment | Rotten food |



| Oven / Range: | | |
|-------------------|------------|----|
| Range Hood: | | Ok |
| Oven Door Handle: | Ok | |
| Oven Racks: | Ok | |
| Range Top: | Not Ok | |
| Charges Type | Replace | |
| Charges | | |
| Comment | Disgusting | |



| Rubber Stopper: | Not Ok |
|-----------------|---------|
| Charges Type | Replace |
| Charges | |
| Comment | Missing |



| 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: | |
|------------------|---------|
| Door / Closet: | Ok |
| Floors / Carpet: | Not Ok |
| Charges Type | Replace |
| Charges | |
| Comment | Filthy |



| Other: | Ok |
|-------------------|---------|
| Walls / Outlets: | Ok |
| Window: | Ok |
| Window coverings: | Not Ok |
| Charges Type | Replace |
| Charges | |
| Comment | Broken |



| BATHROOM: | |
|--------------------|------------|
| Cabinets / Mirror: | Ok |
| Ceiling Lights: | Ok |
| Cleaning Bathroom: | Not Ok |
| Charges Type | Clean |
| Charges | |
| Comment | Disgusting |



| Complete Toilet: | Ok |
|-------------------------|----|
| Counter Top: | Ok |
| Floors: | Ok |
| Formica /Tile: | Ok |
| Medicine Cabinet: | Ok |
| Mirror Cabinet: | Ok |
| Other: | Ok |
| 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 |

| 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 |

| KEYS: | |
|----------------------------------|----|
| Failure To Return Apartment Key: | Ok |
| Failure To Return Mailbox Key: | Ok |

| DOORS: | |
|--------------------------------------|----|
| Apartment Door: | Ok |
| Apartment Door closes automatically: | Ok |
| Frame: | Ok |
| Hollow: | Ok |
| Solid Core & Steel: | Ok |

| PAINTING: | |
|-------------------------------|----|
| Border Removal (Per Room): | Ok |
| Holes in Walls (Each Hole): | Ok |
| Over Dark Colors (Per Room): | Ok |
| Wallpaper Removal (Per Room): | Ok |

| Burns: | Ok |
|---------------------------|---------------------------------|
| Deodorize: | Ok |
| Pet Treatment (Odor): | Ok |
| Replace Carpet 1 Bedroom: | Not Ok |
| Charges Type | Replace |
| Charges | |
| Comment | Cat feces everywhere and stains |



| Shampoo 1 Bedroom: | Ok |
|--------------------|----|
| Shampoo 2 Bedroom: | Ok |
| Stain Removal: | Ok |

| MISCELLANEOUS: | |
|---------------------------|----------------------------|
| Cabinet Equipment: | Ok |
| Carbon Monoxide Detector: | Ok |
| Cleaning of Apartment: | Not Ok |
| Charges Type | Replace |
| Charges | |
| Comment | Whole apartment is trashed |



| Clear Storage Locker: | Ok |
|-----------------------|----|
| | |

| Closet Shelves: | Ok |
|--|-------------|
| Common Area damaged during moveout: | Ok |
| Door Intercom System: | Ok |
| Exhaust Fan: | Ok |
| Fan Blades: | Ok |
| Fire extinguisher: | Ok |
| If fire stops have been installed throughout the property, ensure fire stops are installed.: | Ok |
| Light Globes: | Ok |
| Outside Lights: | Ok |
| Phone Jack: | Ok |
| Rallings: | Ok |
| Removal Of Bulk Items: | Not Ok |
| Charges Type | Replace |
| Charges | |
| Comment | Other stuff |



| Remove Debris (Per Bag): | Not Ok |
|--------------------------|--------------------|
| Charges Type | Replace |
| Charges | |
| Comment | Gonna need 50 bags |



| 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 |
| Vinly Tile Bathroom: | Ok |
| Vinly Tile Kitchen: | Ok |
| Window Screen(s) each: | Ok |
| Window Sills: | Ok |

| OVERALL: | |
|--|----|
| Signs of Moisture inside the apartment: | Ok |
| Signs of Moisture outside the apartment: | Ok |

| Resident | | | | |
|----------|--|--|--|--|
|----------|--|--|--|--|

| Lindy Community Representative Name | Gregg Smith |
|-------------------------------------|-------------|
| | |



| Technician | Gregg Smith |
|--------------------------------------|-------------|
| Resident not available for signature | NO |
| Resident refused Signature | NO |