

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

| Inspection Date | Technician   | Property       | Units |
|-----------------|--------------|----------------|-------|
| 09-03-2020      | Dudlow Blake | 7400 Roosevelt | C201  |

| Resident Name                | Elvilys Rodriguez |
|------------------------------|-------------------|
| Forwarding Mailing Address   | Not Available     |
| Date Resident Turned in Keys | Not Available     |

| LIVING ROOM:                        |                 |
|-------------------------------------|-----------------|
| Walls / Outlets:                    | Ok              |
| Ceilings / Lights:                  | Ok              |
| Window:                             | Ok              |
| Door / Closet:                      | Ok              |
| Window coverings:                   | Ok              |
| Other:                              | Ok              |
| KITCHEN:                            |                 |
| Electric Meter:                     | Ok              |
| Cabinets:                           | Ok              |
| Cabinet Door:                       | Ok              |
| Cabinet Shelf:                      | Ok              |
| Cabinet Handle:                     | Ok              |
| Counter Top:                        | Ok              |
| Refrigerator (Freezer):             | Ok              |
| Refrigerator (Shelf and Bars):      | Ok              |
| Refrigerator (Drawers):             | Ok              |
| Refrigerator Crisper Glass/Plastic: | Ok              |
| Cleaning Refrigerator:              | Ok              |
| Comment                             | Cleaning needed |
| Dishwasher Rack:                    | Ok              |

| Dishwasher Silverware Holder: | Ok       |
|-------------------------------|----------|
| Dishwasher Knob:              | Ok       |
| Fire Stops:                   | Ok       |
| Formica/Tiles:                | Ok       |
| Stove Knob:                   | Ok       |
| Microwave:                    | Ok       |
| Cleaning of Stove:            | Ok       |
| Ceiling Lights:               | Ok       |
| Garbage Disposal:             | Ok       |
| Rubber Stopper:               | Ok       |
| Oven Door Handle:             | Ok       |
| Oven Racks:                   | Ok       |
| Kitchen Sink:                 | Ok       |
| Faucet Knobs:                 | Ok       |
| Floors:                       | Ok       |
| Faucet:                       | Ok       |
| Drip Pan:                     | Ok       |
| Range Hood:                   | Ok       |
| Range Top:                    | Ok       |
| Ceiling Light Fixture:        | Ok       |
| Backsplash:                   | Ok       |
| Ceiling Fan:                  | Ok       |
| Washer/Dryer:                 | Ok       |
| Wall Outlets:                 | Ok       |
| Window Coverings:             | Ok       |
| Other:                        | Ok       |
| BATHROOM:                     |          |
| Cleaning Bathroom:            | Not Ok   |
| Charges Type                  | Clean    |
| Charges                       |          |
| Comment                       | Cleaning |



| LOCKS:  |           |
|---|-----------|
| Door Lock:  | Ok        |
| Door Knob:  | Ok        |
| Fix Door when extra lock is removed:                                      | Ok        |
| Mail-Box Lock:  | Ok        |
| Ensure the apartment door has an automatic closure and closes properly. : | Ok        |
| KEYS:   |           |
| Failure To Return Apartment Key:  | Ok        |
| Failure To Return Mailbox Key:  | Ok        |
| DOORS:  |           |
| Apartment Door:   | Ok        |
| Solid Core & Steel:   | Ok        |
| Frame:  | Ok        |
| Hollow:   | Ok        |
| PAINTING:   |           |
| Wallpaper Removal (Per Room):   | Ok        |
| CARPET:   |           |
| Replace Carpet 2 Bedroom:   | Not Ok    |
| Charges Type  | Replace   |
| Charges   |           |
| Comment   | Replacing |



| MISCELLANEOUS:         |          |
|------------------------|----------|
| Removal Of Bulk Items: | Not Ok   |
| Charges Type           | Clean    |
| Charges                |          |
| Comment                | Cleaning |



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



| Technician                           | Dudlow Blake |
|--------------------------------------|--------------|
| Resident not available for signature | YES          |
| Resident refused Signature           | NO           |