



Move Out Inventory & Condition Form

Inspection Date	Technician	Property	Units
09-17-2021	Peter Tester	201-207 Leedom St.	207-102

Resident Name	Independent Clinical
Forwarding Mailing Address	Ugh
Date Resident Turned in Keys	Not Available

LIVING ROOM:	
Ceilings / Lights:	Ok
Door / Closet:	Ok
Other:	Ok
Walls / Outlets:	Ok
Window:	Ok
Window coverings:	Ok

KITCHEN:	
Fire Stops:	Ok

MISCELLANEOUS:	
Common Area damaged during moveout:	Ok
Fire extinguisher:	Ok
If fire stops have been installed throughout the property, ensure fire stops are installed.:	Ok

Resident	test
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Lindy Community Representative Name

Peter Tester



Technician

Peter Tester

Resident not available for signature

NO

Resident refused Signature

NO