

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

| Inspection Date | Technician   | Property    | Units |
|-----------------|--------------|-------------|-------|
| 09-23-2020      | Peter Tester | Meadowbrook | 167   |

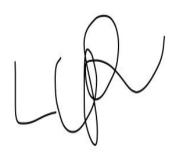
| Resident Name                | Marilyn Bleznak |
|------------------------------|-----------------|
| Forwarding Mailing Address   | Imp             |
| Date Resident Turned in Keys | Sep-23-2020     |

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



Lindy Community Representative Name

Peter Tester



| Technician                           | Peter Tester |
|--------------------------------------|--------------|
| Resident not available for signature | NO           |
| Resident refused Signature           | NO           |