

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

| Inspection Date              | Technician  | Prope      | rty    | Units  |
|------------------------------|-------------|------------|--------|--------|
| 10-04-2021                   | Marva Brown | Enclaves   |        | 3912C2 |
| Resident Name                |             | Diamond S  | ihuler |        |
| Forwarding Mailing Address   |             | None giver | า      |        |
| Date Resident Turned in Keys |             | Sep-28-202 | 21     |        |
| LIVING ROOM:                 |             |            |        |        |
| Ceilings / Lights:           |             |            | Ok     |        |
| Door / Closet:               |             |            | Ok     |        |
| Other:                       |             |            | Ok     |        |
| Walls / Outlets:             |             |            | Ok     |        |
| Window:                      |             |            | Ok     |        |
| Window coverings:            |             |            | Ok     |        |
| DINING ROOM:                 |             |            |        |        |
| Ceilings / Lights:           |             |            | Ok     | <      |
| Walls / Outlets:             |             |            | Ok     | (      |
| Window:                      |             |            | Ok     | (      |
| Window coverings:            |             |            | Ok     | ζ      |
| KITCHEN:                     |             |            |        |        |
| Backsplash:                  |             | Ok         |        |        |
| Cabinets:                    |             |            |        |        |
| Cabinet Door:                |             |            | Ok     |        |
| Cabinets:                    |             |            |        |        |
| Cabinet Handle:              |             |            | Ok     |        |

| Cabinets:                     |    |    |    |
|-------------------------------|----|----|----|
| Cabinet Shelf:                |    |    | Ok |
| Ceiling Fan:                  | Ok |    |    |
| Ceiling Light Fixture:        | Ok |    |    |
| Ceiling Lights:               | Ok | Ok |    |
| Cleaning of Stove:            | Ok |    |    |
| Dishwasher:                   |    |    |    |
| Dishwasher Knob:              |    |    | Ok |
| Dishwasher:                   |    |    |    |
| Dishwasher Rack:              |    |    | Ok |
| Dishwasher:                   |    |    |    |
| Dishwasher Silverware Holder: |    |    | Ok |
| Drip Pan:                     | Ok |    |    |
| Faucet:                       | Ok |    |    |
| Faucet Knobs:                 | Ok |    |    |
| Fire Stops:                   | Ok |    |    |
| Floors:                       | Ok |    |    |
| Formica/Tiles:                | Ok |    |    |
| Garbage Disposal:             | Ok |    |    |
| Kitchen Sink:                 | Ok |    |    |
| Microwave:                    | Ok |    |    |
| Other:                        | Ok |    |    |

| Oven / Range:  |  |
|----------------|--|
| Oven Cleaning: | Not Ok   |
| Charges Type   | Replace  |
| Charges        |  |
| Comment        | Bottom of oven severely burned will need replacing |



| 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: | Ok |

| Oven / Range: |    |
|---------------|----|
| Range Hood:   | Ok |

| Oven Door Handle: | Ok     |
|-------------------|--------|
| Oven Racks:       | Ok     |
| Range Top:        | Not Ok |
| Charges Type      | Clean  |
| Charges           |        |

Comment Not cleaned



| Refrigerator (Freezer): |    |
|-------------------------|----|
| Cleaning Refrigerator:  | Ok |
|                         |    |

| 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 |    |
| 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 |

|--|

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



| Complete Toilet:   | Ok          |
|--|-------------|
| Counter Top:   | Ok          |
| Floors:  | Ok          |
| Formica /Tile:   | Ok          |
| Is there signs of moisture from outside in the apartment?: | 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:   | Not Ok      |
| Charges Type   | Clean       |
| Charges  |             |
| Comment  | Not cleaned |



| 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 |

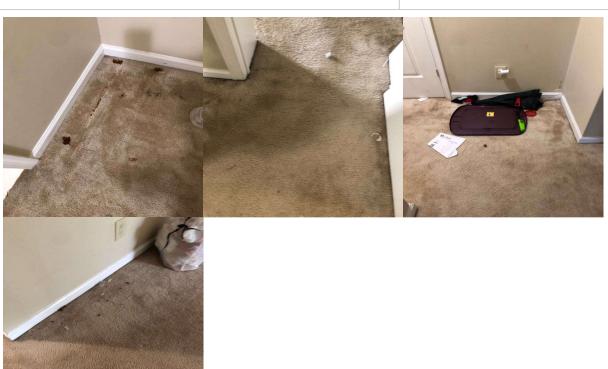
| DOORS:              |    |
|---------------------|----|
| Apartment Door:     | Ok |
| Frame:              | Ok |
| Hollow:             | Ok |
| Solid Core & Steel: | Ok |

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

| Wallpaper  | Removal    | (Per  | Room    | ١. |
|------------|------------|-------|---------|----|
| vvalipapei | INCITIOVAL | (1 (1 | 1100111 | ,. |

Ok

| CARPET:                   |             |
|---------------------------|-------------|
| Burns:                    | Ok          |
| Deodorize:                | Ok          |
| Pet Treatment (Odor):     | Ok          |
| Replace Carpet 1 Bedroom: | Ok          |
| Replace Carpet 2 Bedroom: | Ok          |
| Shampoo 1 Bedroom:        | Not Ok      |
| Charges Type              | Clean       |
| Charges                   |             |
| Comment                   | Not cleaned |



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

| MISCELLANEOUS:                  |        |
|---------------------------------|--------|
| Broken Window Glass (Per Pane): | Ok     |
| Cabinet Equipment:              | Ok     |
| Carbon Monoxide Detector:       | Ok     |
| Cleaning of Apartment:          | Not Ok |

| Charges Type | Clean  |
|--------------|--|
| Charges      |  |
| Comment      | Bulk items, trash and debris<br>throughout apt |



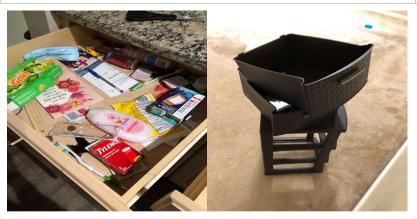
| Clear Storage Locker: | Ok          |
|-----------------------|-------------|
| Closet Shelves:       | Not Ok      |
| Charges Type          | Clean       |
| Charges               |             |
| Comment               | Not cleaned |



| Common Area damaged during moveout: | Ok                           |
|-------------------------------------|------------------------------|
| Door Intercom System:               | Ok                           |
| Exhaust Fan:                        | Ok                           |
| Fan Blades:                         | Not Ok                       |
| Charges Type                        | Repair                       |
| Charges                             |                              |
| Comment                             | Balloons stuck in fan blades |



| Fire extinguisher:   | 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:   | Not Ok                                 |
| Charges Type   | Clean                                  |
| Charges  |  |
| Comment  | Bulk items and 4 bags of trash removed |



| Remove Debris (Per Bag): | Not Ok                    |
|--------------------------|---------------------------|
| Charges Type             | Clean                     |
| Charges                  |                           |
| Comment                  | Trash left throughout apt |



| 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 |
| Window Screen(s) each:                   | Ok |
| Window Sills:                            | Ok |

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

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

Lindy Community Representative Name

Marva Brown



| Technician                           | Marva Brown |
|--------------------------------------|-------------|
| Resident not available for signature | YES         |
| Resident refused Signature           | NO          |