



# Move Out Inventory & Condition Form

Inspection Date	Technician	Property	Units
10-05-2022	Dudlow Blake	Joshua House	B0207

Resident Name	Maryann Moore
Forwarding Mailing Address	Not Available
Date Resident Turned in Keys	Not Available

Amenities to be added to this Unit
Granite/Quartz Countertops
Plank Flooring
Black Appliances
Bathroom Upgrade

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

KITCHEN:	
Backsplash:	Ok

Cabinets:	Ok
Ceiling Fan:	Ok
Ceiling Light Fixture:	Ok
Ceiling Lights:	Ok
Cleaning of Stove:	Ok
Counter Top:	Ok
Dishwasher:	Ok
Drip Pan:	Ok
Electric Meter:	Ok
Faucet:	Ok
Faucet Knobs:	Ok
Floors:	Ok
Formica/Tiles:	Ok
Garbage Disposal:	Ok
Kitchen Sink:	Ok
Microwave:	Ok
Other:	Ok
Oven / Range:	Ok
Oven Door Handle:	Ok
Oven Racks:	Ok
Range Top:	Ok
Refrigerator (Freezer):	Ok
Rubber Stopper:	Ok
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

<b>BEDROOMS:</b>	
Ceilings / Lights:	Ok
Door / Closet:	Ok
Floors / Carpet:	Ok
Other:	Ok

Walls / Outlets:	Ok
Window:	Ok
Window coverings:	Ok

<b>BATHROOM:</b>	
Cabinets / Mirror:	Ok
Ceiling Lights:	Ok
Cleaning Bathroom:	Ok
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:	Ok
Towel Bar:	Ok
Tub Knob(s):	Ok
Tub Reglazing:	Ok
Vanity Cabinet:	Ok
Wall Outlets:	Ok
Window:	Ok

<b>LOCKS:</b>	
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

<b>KEYS:</b>	
Failure To Return Apartment Key:	Ok
Failure To Return Mailbox Key:	Ok

<b>DOORS:</b>	
Apartment Door:	Ok
Apartment Door closes automatically:	Ok
Frame:	Ok
Hollow:	Ok
Solid Core & Steel:	Ok

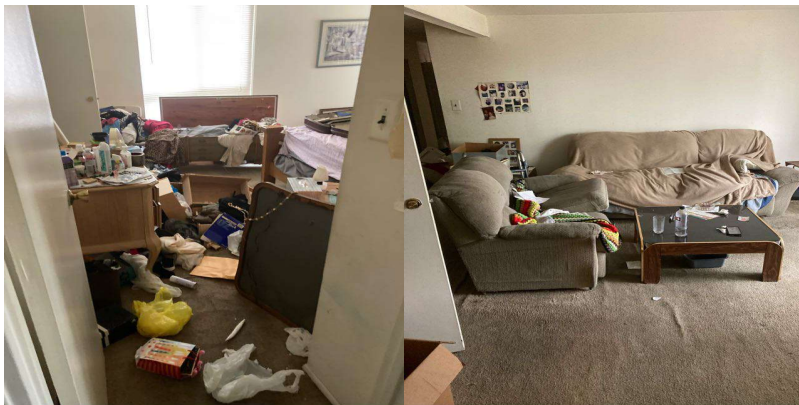
<b>PAINTING:</b>	
Border Removal (Per Room):	Ok
Holes in Walls (Each Hole):	Ok
Over Dark Colors (Per Room):	Ok
Wallpaper Removal (Per Room):	Ok

<b>CARPET:</b>	
Burns:	Ok
Deodorize:	Ok
Pet Treatment (Odor):	Ok
Replace Carpet 1 Bedroom:	Ok
Replace Carpet 2 Bedroom:	Ok
Shampoo 1 Bedroom:	Ok
Shampoo 2 Bedroom:	Ok
Stain Removal:	Ok

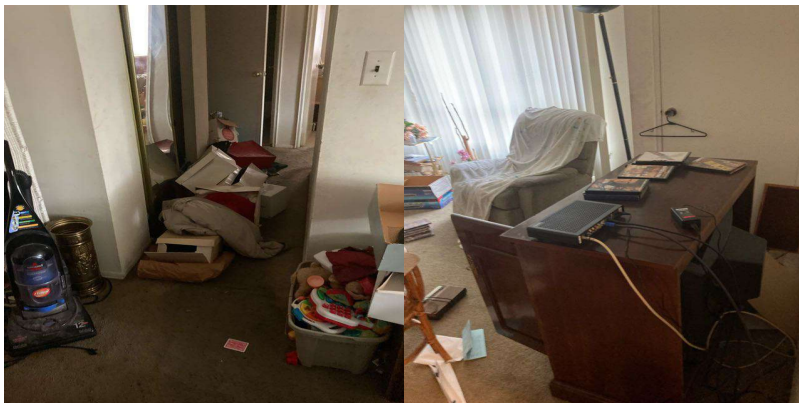
<b>MISCELLANEOUS:</b>	
Cleaning of Apartment:	Not Ok
Charges Type	Clean
Charges	
Comment	Cleaning



Clear Storage Locker:	Ok
Fire extinguisher:	Ok
Removal Of Bulk Items:	Not Ok
Charges Type	Clean
Charges	
Comment	Cleaning



Remove Debris (Per Bag):	Not Ok
Charges Type	Clean
Charges	
Comment	Cleaning



<b>OVERALL:</b>	
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Signs of Moisture inside the apartment:	Ok
Signs of Moisture outside the apartment:	Ok

Resident	
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Lindy Community Representative Name	Dudlow Blake
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Technician	Dudlow Blake
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Resident not available for signature	YES
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Resident refused Signature	NO
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