



# Move Out Inventory & Condition Form

| Inspection Date | Technician  | Property          | Units  |
|-----------------|-------------|-------------------|--------|
| 12-21-2022      | Josh Kozich | Towers at Wyncote | 0428-1 |

|                              |               |
|------------------------------|---------------|
| Resident Name                | Jiaxin Wen    |
| Forwarding Mailing Address   | Not Available |
| Date Resident Turned in Keys | Dec-21-2022   |

|                     |        |
|---------------------|--------|
| <b>LIVING ROOM:</b> |        |
| Ceilings / Lights:  | Ok     |
| Door / Closet:      | Ok     |
| Other:              | Ok     |
| Plank Flooring:     | Not Ok |
| Charges Type        | Clean  |
| Charges             |        |
| Comment             | Clean  |



|                   |    |
|-------------------|----|
| Walls / Outlets:  | Ok |
| Window:           | Ok |
| Window coverings: | Ok |

|                     |    |
|---------------------|----|
| <b>DINING ROOM:</b> |    |
| Ceilings / Lights:  | Ok |

|                   |    |
|-------------------|----|
| Plank Flooring:   | Ok |
| Walls / Outlets:  | Ok |
| Window:           | Ok |
| Window coverings: | Ok |

|                 |    |
|-----------------|----|
| <b>KITCHEN:</b> |    |
| Backsplash:     | Ok |

|                  |    |
|------------------|----|
| <b>Cabinets:</b> |    |
| Cabinet Door:    | Ok |

|                  |    |
|------------------|----|
| <b>Cabinets:</b> |    |
| Cabinet Handle:  | Ok |

|                  |    |
|------------------|----|
| <b>Cabinets:</b> |    |
| Cabinet Shelf:   | Ok |

|                        |        |
|------------------------|--------|
| Ceiling Fan:           | Ok     |
| Ceiling Light Fixture: | Ok     |
| Ceiling Lights:        | Ok     |
| Cleaning of Stove:     | Not Ok |
| Charges Type           | Clean  |
| Charges                |        |
| Comment                | Clean  |



|                    |    |
|--------------------|----|
| Counter Top:       | Ok |
| <b>Dishwasher:</b> |    |
| Dishwasher Knob:   | Ok |

|                    |  |    |
|--------------------|--|----|
| <b>Dishwasher:</b> |  |    |
| Dishwasher Rack:   |  | Ok |

|                               |  |    |
|-------------------------------|--|----|
| <b>Dishwasher:</b>            |  |    |
| Dishwasher Silverware Holder: |  | 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 |

|                      |  |    |
|----------------------|--|----|
| <b>Oven / Range:</b> |  |    |
| Oven Cleaning:       |  | Ok |

|                      |  |    |
|----------------------|--|----|
| <b>Oven / Range:</b> |  |    |
| Oven door handle:    |  | Ok |

|                      |  |    |
|----------------------|--|----|
| <b>Oven / Range:</b> |  |    |
| Oven drip pan:       |  | Ok |

|                      |  |    |
|----------------------|--|----|
| <b>Oven / Range:</b> |  |    |
| Oven knobs:          |  | Ok |

|                      |  |    |
|----------------------|--|----|
| <b>Oven / Range:</b> |  |    |
| Oven Racks:          |  | Ok |

|                      |  |    |
|----------------------|--|----|
| <b>Oven / Range:</b> |  |    |
| Range burners:       |  | Ok |

|                      |  |    |
|----------------------|--|----|
| <b>Oven / Range:</b> |  |    |
| Range Hood:          |  | Ok |

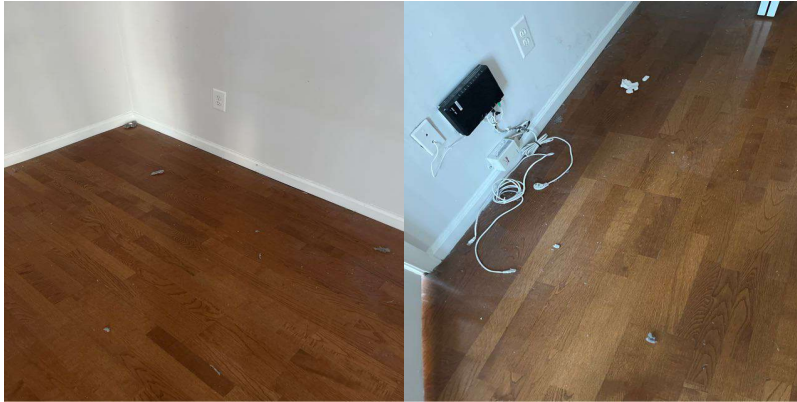
  

|                   |  |    |
|-------------------|--|----|
| Oven Door Handle: |  | Ok |
|-------------------|--|----|

| Oven Racks:                                                                                                                                                                                                                                                 | Ok     |                         |  |                                     |        |              |       |         |  |         |       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-------------------------|--|-------------------------------------|--------|--------------|-------|---------|--|---------|-------|
| Range Top:                                                                                                                                                                                                                                                  | Ok     |                         |  |                                     |        |              |       |         |  |         |       |
| <table> <tr> <th colspan="2">Refrigerator (Freezer):</th></tr> <tr> <td>Cleaning Refrigerator:</td><td>Not Ok</td></tr> <tr> <td>Charges Type</td><td>Clean</td></tr> <tr> <td>Charges</td><td></td></tr> <tr> <td>Comment</td><td>Clean</td></tr> </table> |        | Refrigerator (Freezer): |  | Cleaning Refrigerator:              | Not Ok | Charges Type | Clean | Charges |  | Comment | Clean |
| Refrigerator (Freezer):                                                                                                                                                                                                                                     |        |                         |  |                                     |        |              |       |         |  |         |       |
| Cleaning Refrigerator:                                                                                                                                                                                                                                      | Not Ok |                         |  |                                     |        |              |       |         |  |         |       |
| Charges Type                                                                                                                                                                                                                                                | Clean  |                         |  |                                     |        |              |       |         |  |         |       |
| Charges                                                                                                                                                                                                                                                     |        |                         |  |                                     |        |              |       |         |  |         |       |
| Comment                                                                                                                                                                                                                                                     | Clean  |                         |  |                                     |        |              |       |         |  |         |       |
|                                                                                                                                                                            |        |                         |  |                                     |        |              |       |         |  |         |       |
| <table> <tr> <th colspan="2">Refrigerator (Freezer):</th></tr> <tr> <td>Refrigerator (Drawers):</td><td>Ok</td></tr> </table>                                                                                                                               |        | Refrigerator (Freezer): |  | Refrigerator (Drawers):             | Ok     |              |       |         |  |         |       |
| Refrigerator (Freezer):                                                                                                                                                                                                                                     |        |                         |  |                                     |        |              |       |         |  |         |       |
| Refrigerator (Drawers):                                                                                                                                                                                                                                     | Ok     |                         |  |                                     |        |              |       |         |  |         |       |
| <table> <tr> <th colspan="2">Refrigerator (Freezer):</th></tr> <tr> <td>Refrigerator (Shelf and Bars):</td><td>Ok</td></tr> </table>                                                                                                                        |        | Refrigerator (Freezer): |  | Refrigerator (Shelf and Bars):      | Ok     |              |       |         |  |         |       |
| Refrigerator (Freezer):                                                                                                                                                                                                                                     |        |                         |  |                                     |        |              |       |         |  |         |       |
| Refrigerator (Shelf and Bars):                                                                                                                                                                                                                              | Ok     |                         |  |                                     |        |              |       |         |  |         |       |
| <table> <tr> <th colspan="2">Refrigerator (Freezer):</th></tr> <tr> <td>Refrigerator Crisper Glass/Plastic:</td><td>Ok</td></tr> </table>                                                                                                                   |        | Refrigerator (Freezer): |  | Refrigerator Crisper Glass/Plastic: | Ok     |              |       |         |  |         |       |
| Refrigerator (Freezer):                                                                                                                                                                                                                                     |        |                         |  |                                     |        |              |       |         |  |         |       |
| Refrigerator Crisper Glass/Plastic:                                                                                                                                                                                                                         | 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     |                         |  |                                     |        |              |       |         |  |         |       |

| BEDROOMS:          |    |
|--------------------|----|
| Ceilings / Lights: | Ok |
| Door / Closet:     | Ok |
| Floors / Carpet:   | Ok |
| Other:             | Ok |

|                 |        |
|-----------------|--------|
| Plank Flooring: | Not Ok |
| Charges Type    | Clean  |
| Charges         |        |
| Comment         | Clean  |



|                   |    |
|-------------------|----|
| Walls / Outlets:  | Ok |
| Window:           | Ok |
| Window coverings: | Ok |

| <b>BATHROOM:</b>   |        |
|--------------------|--------|
| Cabinets / Mirror: | Ok     |
| Ceiling Lights:    | Ok     |
| Cleaning Bathroom: | Not Ok |
| Charges Type       | Clean  |
| Charges            |        |
| Comment            | Clean  |



|                  |        |
|------------------|--------|
| Complete Toilet: | Ok     |
| Counter Top:     | Not Ok |
| Charges Type     | Clean  |
| Charges          |        |

| Comment                                                                           | Clean |
|-----------------------------------------------------------------------------------|-------|
|  |       |
| Floors:                                                                           | Ok    |
| Formica /Tile:                                                                    | Ok    |
| Is there signs of moisture from outside in the apartment?:                        | Ok    |
| Medicine Cabinet:                                                                 | Ok    |
| Mirror Cabinet:                                                                   | Ok    |
| Other:                                                                            | Ok    |
| Plank Flooring:                                                                   | 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    |

| 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 |

|                                  |    |
|----------------------------------|----|
| <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>           |    |
| Broken Window Glass (Per Pane): | Ok |
| Cabinet Equipment:              | Ok |
| Carbon Monoxide Detector:       | Ok |
| Cleaning of Apartment:          | Ok |
| Clear Storage Locker:           | Ok |

|                                                                                              |    |
|----------------------------------------------------------------------------------------------|----|
| Closet Shelves:                                                                              | Ok |
| Common Area damaged during moveout:                                                          | Ok |
| Door Intercom System:                                                                        | Ok |
| Exhaust Fan:                                                                                 | Ok |
| Fan Blades:                                                                                  | Ok |
| 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:                                                                       | Ok |
| Remove Debris (Per Bag):                                                                     | Ok |
| 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 |
| Vinly Tile Bathroom:                                                                         | Ok |
| Vinly Tile Kitchen:                                                                          | Ok |
| Window Screen(s) each:                                                                       | Ok |
| Window Sills:                                                                                | Ok |

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

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

|                                                                                   |             |
|-----------------------------------------------------------------------------------|-------------|
| Lindy Community Representative Name                                               | Josh Kozich |
|  |             |
| Technician                                                                        | Josh Kozich |
| Resident not available for signature                                              | NO          |
| Resident refused Signature                                                        | NO          |