



# Move Out Inventory & Condition Form

| Inspection Date | Technician | Property    | Units |
|-----------------|------------|-------------|-------|
| 12-28-2020      | Paul Oneto | Meadowbrook | 881   |

|                              |               |
|------------------------------|---------------|
| Resident Name                | Felicia Pabon |
| Forwarding Mailing Address   | Not Available |
| Date Resident Turned in Keys | Not Available |

|                                |    |
|--------------------------------|----|
| <b>LIVING ROOM:</b>            |    |
| Walls / Outlets:               | Ok |
| Ceilings / Lights:             | Ok |
| Window:                        | Ok |
| Door / Closet:                 | Ok |
| Window coverings:              | Ok |
| Other:                         | Ok |
| <b>DINING ROOM:</b>            |    |
| Walls / Outlets:               | Ok |
| Ceilings / Lights:             | Ok |
| Window:                        | Ok |
| Window coverings:              | Ok |
| <b>KITCHEN:</b>                |    |
| Electric Meter:                | Ok |
| Cabinets:                      | Ok |
| Cabinet Door:                  | Ok |
| Cabinet Shelf:                 | Ok |
| Cabinet Handle:                | Ok |
| Counter Top:                   | Ok |
| Refrigerator (Freezer):        | Ok |
| Refrigerator (Shelf and Bars): | Ok |

|                                      |    |
|--------------------------------------|----|
| Refrigerator (Drawers):              | Ok |
| Refrigerator Crisper Glass/Plastic:  | Ok |
| Cleaning Refrigerator:               | Ok |
| Dishwasher Rack:                     | Ok |
| Dishwasher Silverware Holder:        | Ok |
| Dishwasher Knob:                     | Ok |
| Fire Stops:                          | Ok |
| Formica/Tiles:                       | Ok |
| Stove Knob:                          | Ok |
| Microwave:                           | Ok |
| Cleaning of Stove:                   | Ok |
| Ceiling Lights:                      | Ok |
| Garbage Disposal:                    | Ok |
| Rubber Stopper:                      | Ok |
| Oven Door Handle:                    | Ok |
| Oven Racks:                          | Ok |
| Kitchen Sink:                        | Ok |
| Faucet Knobs:                        | Ok |
| Floors:                              | Ok |
| Faucet:                              | Ok |
| Drip Pan:                            | Ok |
| Range Hood:                          | Ok |
| Range Top:                           | Ok |
| Ceiling Light Fixture:               | Ok |
| Backsplash:                          | Ok |
| Ceiling Fan:                         | Ok |
| Washer/Dryer:                        | Ok |
| Wall Outlets:                        | Ok |
| Window Coverings:                    | Ok |
| Other:                               | Ok |
| <b>LOCKS:</b>                        |    |
| Door Lock:                           | Ok |
| Door Knob:                           | Ok |
| Fix Door when extra lock is removed: | Ok |

|                                                                           |    |
|---------------------------------------------------------------------------|----|
| Mail-Box Lock:                                                            | Ok |
| Ensure the apartment door has an automatic closure and closes properly. : | Ok |
| <b>DOORS:</b>                                                             |    |
| Apartment Door:                                                           | Ok |
| Solid Core & Steel:                                                       | Ok |
| Frame:                                                                    | Ok |
| Hollow:                                                                   | Ok |
| <b>PAINTING:</b>                                                          |    |
| Over Dark Colors (Per Room):                                              | Ok |
| Holes in Walls (Each Hole):                                               | Ok |
| Wallpaper Removal (Per Room):                                             | Ok |
| Border Removal (Per Room):                                                | Ok |
| <b>CARPET:</b>                                                            |    |
| Shampoo 1 Bedroom:                                                        | Ok |
| Shampoo 2 Bedroom:                                                        | Ok |
| Stain Removal:                                                            | Ok |
| Burns:                                                                    | Ok |
| Deodorize:                                                                | Ok |
| Pet Treatment (Odor):                                                     | Ok |
| Replace Carpet 1 Bedroom:                                                 | Ok |
| Replace Carpet 2 Bedroom:                                                 | Ok |
| <b>MISCELLANEOUS:</b>                                                     |    |
| Remove Debris (Per Bag):                                                  | Ok |
| Removal Of Bulk Items:                                                    | Ok |
| Clear Storage Locker:                                                     | Ok |
| Closet Shelves:                                                           | Ok |
| Window Sills:                                                             | Ok |
| Window Screen(s) each:                                                    | Ok |
| Broken Window Glass (Per Pane):                                           | Ok |
| Mini Blind(s) each:                                                       | Ok |
| Vertical Blinds:                                                          | Ok |
| Sliding Mirror/Glass Door (2):                                            | Ok |
| Carbon Monoxide Detector:                                                 | Ok |
| Smoke Detector Alarm:                                                     | Ok |

|                                                                                              |            |
|----------------------------------------------------------------------------------------------|------------|
| Fire extinguisher:                                                                           | Ok         |
| Cabinet Equipment:                                                                           | Ok         |
| Vinly Tile Kitchen:                                                                          | Ok         |
| Vinly Tile Bathroom:                                                                         | Ok         |
| Exhaust Fan:                                                                                 | Ok         |
| Phone Jack:                                                                                  | Ok         |
| Fan Blades:                                                                                  | Ok         |
| Light Globes:                                                                                | Ok         |
| Door Intercom System:                                                                        | Ok         |
| Switch Plate Covers:                                                                         | Ok         |
| Rallings:                                                                                    | Ok         |
| Outside Lights:                                                                              | Ok         |
| Stoppage by foreign object in any drain:                                                     | Ok         |
| Thermostat Cover:                                                                            | Ok         |
| Cleaning of Apartment:                                                                       | Ok         |
| Common Area damaged during moveout:                                                          | Ok         |
| If fire stops have been installed throughout the property, ensure fire stops are installed.: | Ok         |
| <b>OVERALL:</b>                                                                              |            |
| Signs of Moisture inside the apartment:                                                      | Ok         |
| Signs of Moisture outside the apartment:                                                     | Ok         |
| Resident                                                                                     |            |
|                                                                                              |            |
| Lindy Community Representative Name                                                          | Paul Oneto |



|                                      |            |
|--------------------------------------|------------|
| Technician                           | Paul Oneto |
| Resident not available for signature | YES        |
| Resident refused Signature           | NO         |