



Move Out Inventory & Condition Form

| Inspection Date | Technician | Property | Units |
|-----------------|-------------|----------------|-------|
| 12-29-2021 | Marva Brown | Gateway Towers | A604 |


| | |
|------------------------------|----------------------------------------|
| Resident Name | Hilary Zellner |
| Forwarding Mailing Address | 5111 Ellis Drive, Glen Mills, PA 19342 |
| Date Resident Turned in Keys | Dec-28-2021 |

| Amenities to be added to this Unit |
|------------------------------------|
| Plank Floors |

| 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 |
| Ceiling Fan: | Ok |
| Ceiling Light Fixture: | Ok |
| Ceiling Lights: | Ok |

| | |
|-------------------------------------------------------------------------------------|-------------|
| Counter Top: | Ok |
| Dishwasher: | |
| Dishwasher Knob: | Ok |
| Dishwasher: | |
| Dishwasher Rack: | Ok |
| Dishwasher: | |
| Dishwasher Silverware Holder: | Ok |
| Drip Pan: | Ok |
| Electric Meter: | Ok |
| Faucet: | Ok |
| Faucet Knobs: | Ok |
| Fire Stops: | Ok |
| Floors: | Ok |
| Formica/Tiles: | Ok |
| Garbage Disposal: | Ok |
| Kitchen Sink: | Ok |
| Microwave: | Not Ok |
| Charges Type | Clean |
| Charges | |
| Comment | Not cleaned |
|  | |
| Other: | Ok |

| Oven / Range: | |
|----------------|-------------|
| Oven Cleaning: | Not Ok |
| Charges Type | Clean |
| Charges | |
| Comment | Not cleaned |



| Oven / Range: | |
|----------------|----|
| Oven drip pan: | Ok |

| | |
|-------------------|----|
| Oven Door Handle: | Ok |
| Oven Racks: | Ok |
| Range Top: | Ok |

| Refrigerator (Freezer): | |
|-------------------------|-------------|
| Cleaning Refrigerator: | Not Ok |
| Charges Type | Clean |
| Charges | |
| Comment | Not cleaned |



| 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:

Not Ok

Charges Type

Repair

Charges

Comment

Holes in walls



Window:

Ok

Window coverings:

Ok

BATHROOM:

Cabinets / Mirror:

Ok

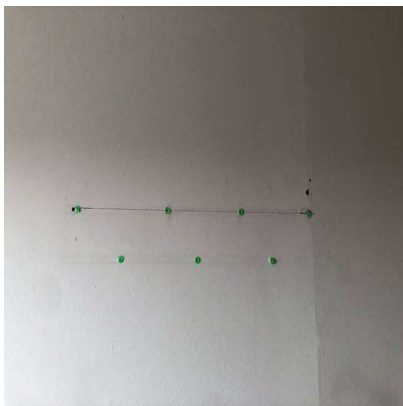
Ceiling Lights:

Ok

Cleaning Bathroom:

Ok

| | |
|-------------------|---------------|
| Complete Toilet: | Ok |
| Counter Top: | Ok |
| Floors: | Ok |
| Formica /Tile: | Ok |
| Medicine Cabinet: | Ok |
| Mirror Cabinet: | Ok |
| Other: | Not Ok |
| Charges Type | Repair |
| Charges | |
| Comment | Holes in wall |



| | |
|-------------------------|----|
| 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 |
| Tub Knob(s): | Ok |
| Tub Reglazing: | Ok |
| Vanity Cabinet: | Ok |
| Wall Outlets: | Ok |
| Window: | Ok |

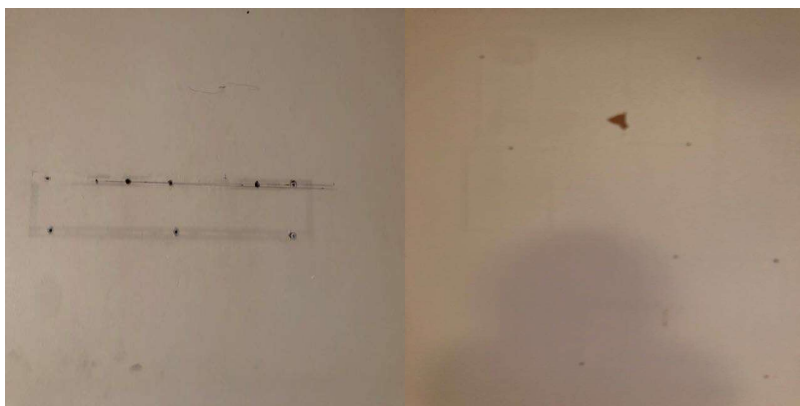
| LOCKS: | |
|------------|----|
| Door Knob: | Ok |
| Door Lock: | Ok |

| | |
|---------------------------------------------------------------------------|----|
| 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): | Not Ok |
| Charges Type | Repair |
| Charges | |
| Comment | 24 holes in walls throughout apt |

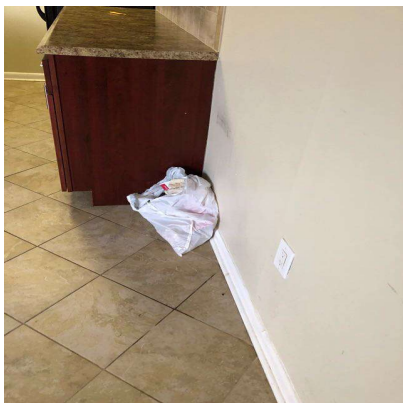


| | |
|-------------------------------|----|
| Over Dark Colors (Per Room): | Ok |
| Wallpaper Removal (Per Room): | Ok |

| | |
|---------------------------|----|
| CARPET: | |
| 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 |

| MISCELLANEOUS: | |
|----------------------------------------------------------------------------------------------|--------------------------|
| 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): | Not Ok |
| Charges Type | Clean |
| Charges | |
| Comment | Bag of trash left in 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 |
| Vinly Tile Bathroom: | Ok |
| Vinly Tile Kitchen: | Ok |
| Window Sills: | Ok |

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

| | |
|--------------------------------------|-------------|
| Resident | |
| <div> <div></div> <div></div> </div> | |
| Lindy Community Representative Name | Marva Brown |



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