

Notice to Vacate



EACH TENANT MUST COMPLETE THIS FORM

Building Address/Apartment #: _____

Tenant Name: _____

Today's Date: _____

I hereby give notice that I shall vacate the address above on the _____ day of _____, 20____

Security deposits **must** be refunded jointly to all persons named on the lease. Any variation must be in writing and agreed to by all parties prior to vacating.

I hereby request that upon my vacating, if everything is found in satisfactory condition after the inspection & all keys have been returned, my portion of the security deposit will be returned to me approximately thirty (30) days after the lease ending date.

Resident must schedule a date and time for a move-out apartment inspection. If no date is given, resident(s) waives the right to be present for the move-out inspection.

Date of inspection: _____ **Time of inspection:** _____

Save Time and Energy! Apartments are expected to be CLEAN at your move-out inspection. If you wish to have your apartment cleaned by us, please initial _____ and we will get it spic and span for you. We can even deduct the charge from your security deposit – what could be easier? This does not include trash removal and the prices quoted are for “normal” cleanings, upcharges may apply. (See office for prices)

Deposit to be mailed to: _____

Reason for vacating: _____

Email Address: _____

Are you enrolled in our electronic pay program? Yes or No

Signature: _____ Date: _____

For Office Use Only

Date vacated: _____

Security deposit amount: \$ _____ Refund amount \$ _____

Balance due _____

Deductions/Comments _____

Tenant received list of what is expected to be cleaned (Yes or No) Staff Initials _____