

VACATE REPORT



Name of Property: _____ Date: _____

Resident: _____ Apt. No.: _____
(Last Name) (First Name)

CHARGES AGAINST DEPOSIT:

The apartment was inspected _____ and the following repairs were needed:

- Cleaning/trash out \$ _____
- Carpet _____
- Painting _____
- Extermination _____
- Appliances _____
- Fixture replacement _____
- Other _____

Total \$ _____

SECURITY DEPOSIT REFUND:

- Security deposit made \$ _____
- Pet deposit made _____
- Less Unpaid Rent _____
- Less Damages _____
- Less Forfeit (breach) _____
- Total Deductions** \$ _____
- Amount Still Owed \$ _____
- or
- Total Refunded** \$ _____

- RECOMMENDED
- NOT RECOMMENDED

Manager _____
Date _____
COMMENTS: _____

Lease from _____ to _____
Date vacated _____
RENT TO TO _____
Term of lease _____ months
Length of residency _____ months
Date of deposit _____

ADVICE TO FORMER TENANT ON DISPOSITION OF SECURITY DEPOSIT

Date _____
Apt. No. _____
Tenant Name _____
New Address _____

YOUR DEPOSIT OF \$ _____
has been applied as follows:

- Refunded in full
 - Forfeited in full
 - Refunded in part
- The forfeiture was due to:
- Insufficient Notice
 - Unpaid rent \$ _____
 - Cleaning _____
 - Carpet _____
 - Appliances _____
 - Other _____

THANK YOU _____ APARTMENTS

TOTAL REFUND \$ _____
BALANCE DUE \$ _____

Owner/Manager _____

DATE SENT _____