

Move-Out Information Sheet

Tenant Name: _____

Property Address: _____

Forwarding Address (Deposit Return): _____

Move-Out Date: _____

Move-Out Notice Date: _____ Move-Out Inspection Date: _____ Inspection By: _____

Number of Keys Returned to Landlord:

Unit Key(s) _____

Mail Key(s) _____

Additional Key(s) _____

Garage Clicker(s) _____

Notes:

FOR OFFICE USE
ONLY

Security Deposit Returned? Y / N

Deposit Return Date: _____ Mail Date: _____ Amount Returned: _____