

CONFIRMATION OF VACATING PREMISES

Tenant(s) hereby acknowledge and agree that the premises have been completely vacated and Tenant(s) have fully relinquished possession of the premises and any items which Tenant(s) may have left behind.

Tenant(s) affirm that they have turned over all keys, garage door openers, and/or access devices to the property and the community and no longer have any means to access the property. Tenant(s) agree that the property manager or owner may immediately secure the premises and/or change the locks.

Tenant(s) affirm that any items remaining in or on the premises belonged solely to the Tenant(s) and may be discarded, destroyed or disposed of in any manner property manager or owner sees fit.

Tenant(s) understand that they are not permitted back on the premises under any circumstances once they have vacated. They may not grant access to anyone on their behalf. Any work they have scheduled on the property must be done before the premises will be considered vacated.

Street Address of Premises		
Date Vacated		
Address for Security Deposit	Refunds ** Must Be Able to	Accept Certified Mail
Email Address		
Phone Number		
Tenant Signature		Date
Tenant Signature		 Date
I/We acknowledge I/we are lDoor KeysCommunity Key	nereby returning the follow Mail Box Key Amenities Key	ing items: Garage Opener Other :