

Today's Date: ____/____/____

Tenant Name: _____ Email: _____

Tenant Name: _____ Email: _____

Tenant Name: _____ Email: _____

Old Address: _____

New Address: _____

Were all apartment keys returned?

Yes _____ No _____

Was the mailbox key returned?

Yes _____ No _____ N/A _____

Was the garage opener returned?

Yes _____ No _____ N/A _____

Was the parking pass returned?

Yes _____ No _____ N/A _____

Was the carpet cleaning receipt returned?

**** IF YES, PLEASE ATTACH TO THIS FORM ****

Yes _____ No _____ N/A _____

IF KEYS ARE RETURNED TO THE LANDLORD BEFORE THE LAST DAY OF THE LEASE, TENANT ACKNOWLEDGES THAT THIS DOES NOT CONSTITUTE AN ACCEPTANCE OF POSSESSION AND/OR TENANT'S SURRENDER OF THE APARTMENT AND THAT THE LEASE ENDING DATE REMAINS AS INDICATED ON THE LEASE.

Signature: _____

Date: _____