## SECURITY DEPOSIT VERIFICATION REPORT

DATE SENT TO ACCOUNTING ___/___/___

PROPERTY NAME _____

UNIT NUMBER _____ APARTMENT TYPE _____

UNIT ADDRESS _____

RESIDENT NAME _____ RESIDENT # _____

LEASE START DATE ___/___/___        LEASE EXPIRATION DATE ___/___/___

REASON VACATED : ___MOVING ___EVICTION ___ SKIPPED ___ TRANSFER

DATE VACATED ___/___/___

AMOUNT OF SECURITY DEPOSIT                                    $_____

INTEREST ACCRUED    FROM ___/___/___ TO ___/___/___    $_____

PRO-RATED RENT       FROM ___/___/___ TO ___/___/___    $ _____

EARLY TERMINATION FEE  # MTHS _____X  RATE_____    $_____

CHECK # OF REFUND _____ AMOUNT OF REFUND $_____

CHECK # OF FORFEIT _____ AMOUNT OF FORFEIT  $_____


TO BE PLACED ON BAD BOY LIST ___YES ___NO

IF YES, WHY? _____

_____


ACCOUNTING DEPT. APPROVED BY _____

DATE RETURNED TO PROPERTY ___/___/___


> **PRO-RATED RENT:  Total Monthly Rent Divided by  the Number of Days within the Month Vacating to find the Daily Rate.  The Daily Rate Times the Actual Days Occupying the Unit.**