



Security Deposit Disposition

Resident: _____

Property Address: _____

Security Deposit: _____ Current Rent _____ Original Move in Date _____

Lease Expiration Date: _____ Notice Date: _____ Date Paid Through: _____

Vacate Date: _____ Date Keys Returned: _____

Forwarding Address: _____

Deductions From deposits

Unpaid Rent: _____ Days @ \$ _____ per day..... \$ _____

Late Charges..... \$ _____

Returned Check Charges..... \$ _____

Unpaid Utilities..... \$ _____

Cost of Reletting:

Advertising _____

Lease Fees: _____ Total Cost \$ _____

General Cleaning _____

_____ Total Cost \$ _____

Repairs _____

_____ Total Cost \$ _____

Miscellaneous _____ \$ _____

Eviction Expenses \$ _____

Other \$ _____ Total Cost \$ _____

Total Deductions \$ _____

Resident Refund or (Balance Due) \$ _____

Please remit this amount immediately to Rental Properties Store \$ _____

Attached is the amount of your Security Deposit in the amount of \$ _____

Manager _____ Date _____

3521 Roma Dr., Las Cruces, NM 88012