

Tenant Security Deposit Reconciliation

Property Address: _____

Tenant Name(s): _____

Tenant Phone Number(s): _____

Forwarding Address of Tenant: _____

Second Forwarding Address: _____

Date Tenant Moved from Above Premises: _____ 20____

List of Tenant Deposits

Security Deposit: _____	\$ _____
Pet Deposit: _____	\$ _____
Other Deposits: _____	\$ _____
Total Deposits	\$ _____

List of Tenant Deductions

Rent: _____	\$ _____
_____	_____
Late Fees: _____	\$ _____
_____	_____
Utilities: _____	\$ _____
Damages: _____	\$ _____
_____	_____
Other Charges: _____	\$ _____
_____	_____
Total Deductions	\$ _____

Balance Due to Landlord / Tenant (*circle one*) \$ _____

Paid by check number: _____ Date paid and mailed: _____ 20____

Signature: _____