

ASHCORT PROPERTY INVESTMENTS

TENANT'S RETURN OF POSSESSION

DATE: _____

THE UNDERSIGNED TENANT(S) HEREBY AFFERMS THAT
THEY HAVE COMPLETELY VACATED THE PREMISES
KNOWN AS;

Property Address: _____

I/we also confirm I/we have returned the following;

Keys: (Y) (N)		Number: _____
Garage Door Remotes: (Y) (N)		Number: _____
Mail Box Keys: (Y) (N)	Box # _____	Number: _____
Gate Cards/Remotes: (Y) (N)		Number: _____

Forwarding address;

Vacating Tenant Signature:

Print Name:

Vacating Tenant Signature:

Print Name:

Vacating Tenant Signature:

Print Name:

Vacating Tenant Signature:

Print Name:

Office Record: Date Received: _____

Delivered in Person: _____ Picked Up: _____ E Mailed: _____ Mailed: _____

E-Mail form to: Ashcorthomes@aol.com

Fax: 407-909-9473