

# SECURITY DEPOSIT RETURN FORM



Please read and fill out the below information in order to have your security deposit returned.

35 E 16th Ave., Ste A  
Columbus, OH 43201  
614.299.2897

In order to ensure a quick return of your security deposit, you must complete the following information. Your security deposit will be returned within 30 days from the end of the lease. The security deposit is returned in one check, this check is to be disbursed among the roommates by the agreed upon representative. **There will be NO exceptions.**

In order to receive your deposit, please complete the information below and return it to our office. All roommates on the original lease must sign below to show agreement on the elected person. Please be sure to include your current address and the address where the deposit check should be mailed in September.

APARTMENT ADDRESS \_\_\_\_\_

NAME OF REPRESENTATIVE FOR  
YOUR APARTMENT

We, the tenants of the aforementioned Apartment, agree that the person listed to the left is to receive the security deposit check for our apartment and is to disburse it among us.

\_\_\_\_\_

\_\_\_\_\_

ADDRESS WHERE DEPOSIT SHOULD  
BE MAILED

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Returning tenants** please note the existing/non-existing damages for roommates who are leaving your apartment and **sign below** next to your disclosure. This is **mandatory** for tenants vacating a returning unit to have their deposit released by their roommates.

**Details/Items** \_\_\_\_\_

**Signatures** \_\_\_\_\_