

# APPLICATION FOR DEPOSIT REFUND

(A form must be completed IN FULL by EACH tenant named on the tenancy)\*

Please complete in BLOCK CAPITALS.



Following the terminal inspection, should any costs need to be deducted from your deposit we will not be able to determine an exact time-scale due to third party invoicing. We will inform you of any intention to deduct within 10 days of the end of your tenancy.

<b>Name of tenant:</b>	
<b>Address of property vacated:</b>	
<b>Name (as it should appear on deposit cheque):</b>	

<b>What was the expiry date of your tenancy?</b>	Date:	
<b>When did the inspection take place?</b>	Time:	Date:
<b>Who inspected the property:</b>	HomeLets Representative / Landlord	
<b>How many sets of keys did you return?</b>		
<b>Where were they deposited on your departure?</b>	HomeLets Representative / HomeLets Office / Other	
Was there any damage to the property or to any of the supplied contents upon your departure?	Yes / No. If "yes" state the nature of damage and name the person responsible overleaf.	
Were there any items of supplied contents, fixtures or fittings missing from the property upon your departure?	Yes / No. If "yes" specify the items and state the reason for discrepancy overleaf.	

<b>Please state the suppliers &amp; meter readings for the following utilities:</b>			
Electricity Supplier:		Electric Reading:	
Gas Supplier:		Gas Reading:	
Water Supplier:		Water reading:	
Telephone/Internet supplier:		Property telephone number:	

<b>What is your forwarding address including postcode:</b>  The deposit cheque will be sent to this address, if no forwarding address is provided, we will correspond with the guarantor or next of kin detailed on the original application form.	Postcode:
<b>Contact Number:</b>	
<b>E-mail address:</b>	

<b>Sign:</b>	<b>Date:</b>
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\*If there were two or more people on the tenancy and it is mutually decided that the deposit should be returned to just one of the tenants, please obtain the consent and signatures of all persons named on the tenancy agreement, overleaf.