DEPOSIT REFUND FORM

Completed & signed form to be returned via email to maintenanceres1@steer.co.za
or by hand to 3rd floor, 144 Longmarket St, Cape Town.

Leaseholder to complete Sections A & B.

TENANT CODE - OFFICE USE

SECTION A

LEASEHOLDER NAME _____

ADDRESS RENTED _____

DATE VACATED _____ DATE KEYS RETURNED _____

SECTION B

BANKING DETAILS

ACC NAME _____

BANK _____

BRANCH _____

BR CODE _____

ACC NO _____

NEW ADDRESS

CELL _____

TEL (H) _____

TEL (W) _____

E-MAIL _____

ADDRESS _____

TENANT'S SIGNATURE _____

Please note that a copy of your ID and proof of your bank account details must accompany this form.

SECTION C - OFFICE USE

DATE LEASE COMMENCED .....

LIABILITY END DATE _____

INGOING INSPECTION _____

OUTGOING INSPECTION _____

RE-LET TO .....

DATE OF NEW LEASE _____

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SECTION D - OFFICE USE

Debit			Credit			
ARREARS ON ACCOUNT	R0,00		DEPOSIT HELD			
ADMIN FEE OPTION	1	2	DATE DEPOSIT WAS HELD FROM		1900/01/00	
ADMIN FEE	R0,00		DURATION DEPOSIT WAS HELD		0	
LEASE CANCELLATION FEE			INTEREST EARNED		R0,00	
ESTIMATE TO HOLD BACK FOR UTILITIES			ELC	WAT	REF	SEW
TOTAL DEDUCTIONS	R0,00		AMOUNT TO BE REFUNDED		**R0,00**	
SETTLEMENT MUST BE DONE BY			EFT PAY DATE			

LANDLORD OUTGOING FEE	Y	N

NOTES

ASSISTANT AUTHORISED ....

MANAGER AUTHORISED ....