

Move Out Closing Statement

Property Name: _____ Unit #: _____

Property Address: _____

Tenants: _____

Owner/Agent: _____ Date: _____

Move-In Date: _____ Move-Out Date: _____

Move -In Charges

Prepaid Rent: \$ _____
 Security Deposit: \$ _____
 Pet Deposit: \$ _____
 Other Deposit: \$ _____
Total Paid at Move-in \$ _____

Move-Out Charges

Painting \$ _____
 Cleaning \$ _____
 Shampooing \$ _____
 Blind Cleaning \$ _____
 Exterminating \$ _____
 Key/Lock Replacement \$ _____
 Goods Removal \$ _____
 Repairs \$ _____
 Replacements \$ _____
 Unpaid Late Fees \$ _____
 Unpaid Utilities \$ _____
 Unpaid Services \$ _____
 Other Damages \$ _____
Total Due at Move-Out \$ _____

Total Due at Move-Out: *(Subtract total due at move-out from Total paid at Move-In)*

From Landlord to Tenant \$ _____

From Tenant to Landlord \$ _____

The above account information is provided to you in accordance with Washington law. Please note that Washington law permits the Landlord to retain from your security deposit such amounts as may be necessary to remedy Tenant's defaults in performance of the Rental Agreement, including, without limitation, unpaid rent, and to repair unusual wear and tear found upon move-out. Landlord reserves right to amend charges set forth in this statement to reflect changes in amounts or charges that were discovered after the move-out inspection. If there is an amount owing to the landlord, please send check to:

Payment must be received by Landlord within _____ days following the date set forth at the top of this Move-Out Closing Statement in order to avoid legal action or possible damage to your credit. Refunds to Tenants will be sent to the below forwarding address.

Tenant Forwarding Information:

Name: _____ Telephone Number: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____