

SECURITY DEPOSIT REFUND / CLAIM STATEMENT (PENNSYLVANIA)

LEASED PREMISES	
Landlord Name:	Landlord Phone No:
Address of Leased Premises:	
City:	State: Pennsylvania
TENANT	
Name(s):	
Forwarding Address:	
New Phone No:	Other Phone No:
Additional Information:	
DEDUCTIONS	
Security Deposit Amount Paid	\$
Other Deposits Paid	\$
Rent Credit:	\$
TOTAL CREDIT	
	\$
CHARGES	
Cleaning Charges [itemize]	\$
	\$
	\$
SUBTOTAL	\$
Damage Charges [itemize]	\$
	\$
	\$
SUBTOTAL	\$
Unpaid Charges	
Unpaid Rent	\$
Uncollected Late Charges	\$
Uncollected Interest	\$
SUBTOTAL	\$
TOTAL CHARGES	
	\$
SUMMARY	
Amount Due to Tenant	\$
Amount Retained by Landlord	\$
Amount Due Landlord	\$
Comments:	

CHECK ENCLOSED: YES NO

Number: _____ Amount: \$ _____

AMOUNT DUE LANDLORD: \$ _____

If there is an Amount Due Landlord above, please forward the full amount to Landlord at the following address:

[insert Landlord's full mailing address]

Signature of Landlord or authorized representative

Date Delivered: _____

SAMPLE PREVIEW