RENTAL ADVANCE DEPOSIT RECEIPT

Receipt No: _____

Date: _____

LANDLORD / PROPERTY MANAGER

Name:

_____

Address:

_____

Phone:

_____

TENANT INFORMATION

Name:

_____

Address:

_____

Phone:

_____

RENTAL PROPERTY DETAILS

Property Address:

_____

Unit/Apt No:

_____

Lease Term:

_____

PAYMENT INFORMATION

Deposit Description	Amount Received
Holding Deposit	$
Security Deposit	$
First Month's Rent	$
Last Month's Rent	$

Deposit Description	Amount Received
Other: _____	$
Total Received:	**$**

METHOD OF PAYMENT

☐
Cash
☐
Check (No: _____)
☐
Bank Transfer
☐
Credit Card

The undersigned acknowledges receipt of the advance deposit amount specified above. This deposit shall be held in accordance with local regulations and the terms of the lease agreement. If the applicant is approved and enters into the lease, this deposit will be applied as indicated above. If the deposit is a holding deposit, terms for refund or forfeiture shall be subject to the separate holding deposit agreement.

_____

Landlord / Authorized Representative Signature

Date:

_____

_____

Tenant / Applicant Signature

Date:

_____