

COMMERCIAL LEASE DAMAGE DEPOSIT RECEIPT

Receipt No:

Date:

LANDLORD / LESSOR DETAILS

Company Name:

Contact Person:

Phone:

Email:

Address:

TENANT / LESSEE DETAILS

Company Name:

Contact Person:

Phone:

Email:

LEASED PREMISES DESCRIPTION

Property Address:

Suite / Unit No:

Lease Date:

DEPOSIT DETAILS

Deposit Amount:

Payment Method:

Amount in Words:

The Landlord hereby acknowledges receipt of the aforementioned damage deposit amount. This deposit shall be held as security for any damages caused to the leased premises during the term of the lease, or any other breaches of the lease agreement, in accordance with the terms and conditions outlined in the commercial lease agreement signed by both parties.

Authorized Landlord Signature

Date

Tenant Signature (Acknowledgment)

Date