



Florida Property Management Solutions, Inc.
 12964 SW 133rd Court · Miami, FL 33186
 Phone: (786) 718-1622 · Facsimile: (786) 718-1623
 E-mail: Accounting@myFPMS.com

Please complete the following in order to request a refund of your *security deposit*. **MUST ATTACH (1) copy of the original cancelled check, receipt, proof of payment AND (2) driver's license or picture id** to this request. Note: A check will be issued *within 30 days from the date of moving or the form received* (whichever comes later). Payment will be mailed to the forwarding address listed below. Forms with missing signatures will not be processed (both signatures req.).

ASSOCIATION NAME: _____

PROPERTY ADDRESS: _____

OWNER NAME: _____

OWNER MAILING ADDRESS: _____

OWNER PHONE: _____

OWNER EMAIL: _____

TENANT NAME: _____

TENANT FORWARDING ADDRESS: _____

TENANT PHONE: _____

TENANT EMAIL: _____

CHECK PAYABLE TO: _____

INSPECTOR NAME: _____	MOVE OUT DATE: _____	STATUS (CIRCLE ONE) Approved / Denied
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COMMENTS: _____

By signing below, I acknowledge that I will received my refund and/or that I have no further claim over the Association for the security funds held in escrow.

OWNER }

TENANT }

Print Name: _____

Print Name: _____

Print Name: _____

Print Name: _____

Date: _____

Date: _____