



HEATH
PROPERTIES

Date: _____

Deposit Transfer Authorization Form

I, _____, hereby allocate all deposits including:
Last Month's Rent and Security Deposit (if applicable) along with any interest accrued there-on to:
_____.

I/We, _____, accept the terms and conditions of the
lease contract from _____ to _____. I/We further accept the condition of the
apartment "as is" as if I moved into the premises on the commencement date of the original lease. I/We
understand that I/we will be held liable for any damages to the apartment, costs, constable notices, late fee's,
fines and physical damage.

(All current and future tenants named in this document must sign in the space above)

Printed Name(s): _____

Address: _____

The above parties agree to change the first name on the lease to: _____.

All correspondence and deposits are returned to the person named first on the lease.