



EXPIRATION OF LEASE

Landlord and Tenant hereby agree that the Lease ends as described below:

Rental Address		
Current Date	Date unit will be vacated	Lease Expiration Date
Primary Tenant	Email Address	Phone #
Forwarding address for Primary Tenant		

The following is required in order to terminate your lease:

- **Monthly Rent** – You must pay rent on the 1st of each month until your lease expiration date.
- **Utilities** – You must keep utilities on and in your name until your lease expiration date.
- **Yard Care & Snow Removal** – If you are responsible for yard care and/or snow removal then you are required to maintain the yard and remove snow until your lease expiration date.
- **Security Deposit** – Cannot be used as last month’s rent. Eclipse Property Management. has 30 days from your lease expiration date to return your deposit or an accounting of the deposit. The accounting and/or refund will be mailed to the Primary Tenant listed on this form.
- **No Subletting** – If you know someone interested in leasing the property, have them submit an application on our website, www.renteclipse.com.
- **Forwarding Address** – If you wish to receive your Security Deposit Return in a timely manner, a forwarding address must be provided to our office prior to moving out.
- **Carpet Cleaning** – Carpets must be professionally cleaned, at your expense. A receipt must be provided to our office at the same time that your keys are turned in.
- **General Cleaning** – Unit must be thoroughly and professionally cleaned at your expense. A receipt must be provided to our office at the same time that your keys are turned in. A cleaning checklist is included with this form.

Accepted and Acknowledged by:

Primary Tenant - Name

Signature

Date

Additional Tenant - Name

Signature

Date

Additional Tenant - Name

Signature

Date

REQUEST FOR DISCONTINUATION OF RESIDENTIAL SERVICE

Form will only be accepted if filled out completely and signed by both parties

Service Address

Street Address: _____ Unit# _____

City: _____ State: _____

Date

Date Billing Responsibility Ends* ____/____/____

Lease Expiration Date

* The date provided represents a mutually agreed to date and will be used in the event of any disputes.

Tenant Information

Primary Name on Account: _____

Contact Telephone Number: (_____) _____ Cell Home Work

Forwarding Address: _____

NOTE TO TENANT: When this form is used it is not necessary to call Xcel Energy to end service.

Owner

Owner/Property Manager Name: _____

Telephone Number: (_____) _____ Date: _____

Signatures

Signatures of both parties are required

Tenant's Signature: _____ Date: _____

Owner/Property Manager Signature: Charlie L. Selby (Must be signed customer named on account) Date: _____

Fax Completed Form to 800-895-2895



RENTAL MOVE OUT CHECKLIST

PAPERWORK		
1	Termination Form Submitted	
2	All Rent / Fees / Charges Paid	
3	Forwarding Address Provided to Eclipse Property Management	
4	Keys Turned in to Eclipse Property Management. & Garage Door Openers left on Kitchen Counter	
5	Receipt For Professional Carpet Cleaning Submitted (with keys)	
6	Receipt for Professional General Cleaning Submitted (with keys)	
CLEANING CHECKLIST (to aid professional cleaning company)		
1	PERSONAL ITEMS	ALL items removed from unit, balcony, storage, etc
2	CARPETS	Have cleaned by a PROFESSIONAL carpet cleaning company
3	LIGHT FIXTURES	Clean fixtures and replace burned out bulbs
4	BASEBOARDS	Vacuum and clean
5	DOORS	Wash all doors inside and out (closets, bedroom, bath and main)
6	WALLS	Wash all walls & light switch covers
7	SHELVES	Clean all shelves in cabinets, closets, bathrooms, and kitchen
8	APPLIANCES	Clean all kitchen appliances inside, outside, underneath, and behind (range, range hood vent, refrigerator, dishwasher, microwave, etc)
9	BATHROOM FIXTURES	Clean sink, toilet, tub faucets, mirrors, etc.
10	CURTAINS / BLINDS	Clean and/or replace curtains/blinds
11	WINDOWS	Clean all windows inside and out, Leave all windows locked
12	FLOORS	Clean all hard floors including the corners and under appliances
13	WINDOW SCREENS	Make sure ALL windows have screens and are repaired if necessary
14	NAILS	Remove from walls, but DO NOT fill in holes
15	HARD WATER STAINS	Remove all hard water stains from sinks, tubs, & toilets w/Pumice Stone