



**RESIDENT KEY RETURN, SURRENDER OF PROPERTY & FORWARDING ADDRESS FORM**

THIS FORM MUST BE SIGNED AND RETURNED AT THE TIME YOU SURRENDER KEYS.  
**UNTIL EVERYTHING OWNED BY YOU IS OUT OF THE PROPERTY, DO NOT SIGN THIS FORM OR RETURN YOUR KEYS**

Resident Name (1): \_\_\_\_\_ Resident Name (2): \_\_\_\_\_  
Please Print Please Print

6201 Paris Street, Citrus Heights CA. 95621 Apartment # \_\_\_\_\_ 6705 Greenback Ln., Citrus Heights CA. 95621 Apartment # \_\_\_\_\_

<b>KEYS.</b>	<b># ISSUED</b>	<b># RECIEVED</b>
Front Door	_____	_____
Security Door	_____	_____
Laundry-Room Door	_____	_____

***You will be charged \$45 for each key not returned.***

I (We) hereby surrender possession and all the keys that I (we) have to the above property to Paris Apartment Properties. I (we) surrender all rights to the property and verify that I (we) have completely vacated the above premises and that nothing of value remains and Paris Apartment Properties may move forward with inspection.

In the event Paris Apartment Properties should find any clothing, furniture, or other items of personal property in or about the above premises, I (we) hereby certify that it has no value and may be discarded and understand charges for removal. Signature of this release and the return of keys does not release tenant from liability regarding rent or damages to the property.

\_\_\_\_\_  
 Resident (1) Signature \_\_\_\_\_  
 Date

\_\_\_\_\_  
 Resident (2) Signature \_\_\_\_\_  
 Date

\_\_\_\_\_  
 Landlord Signature/Agent Signature \_\_\_\_\_  
 Date

**SECURITY DEPOSIT, IF ANY, SHOULD BE MAILED TO THE FOLLOWING ADDRESS:**

**FORWARDING ADDRESS:** \_\_\_\_\_  
Full Name Street

\_\_\_\_\_  
City State Zip.

