

Republic Plaza

TENANT MOVE-OUT CHECK LIST

TENANT:		SUITE:	DATE:	
MOVE OUT DATE:	 Tentative	Final		
Outstanding Changes:	Y N	\$	Amount	
Outstanding Credits:	Y N	\$	Amount	
Notified Vendors Newspaper:	Y N			
Water:				
Plants: Other:				
Returned Security Keys:	Y N			
Returned Brass Keys:	Y N			

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OVING INSURANCE:	Y	N			
Contractor:			Certificate		
Moving Contact Name:				Number:	
Use of Freight Elevator:	Y	N	Date(s):	Time(s):	
Final Walk Through comple	eted on: _		at	a.m. / p.m.	
Damage:	Y	N			
*********			eted by Property Management	and Tenant	
Landlord Signature:		Tenant Signature:			
Date of Conversation:					
Time:					