

HANDING BACK FORM

Date of Handover Back: _____

The Premises Known As: _____

Assessed and inspected the above-mentioned premises, we confirm that we are satisfied with the condition of the premises except for the following item(s):

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

The Landlord will return the balance Security Deposit after deducting, if any, owing and all of the above-mentioned repair/replacement costs to the Tenant within fourteen (14) days from the expiration of the tenancy without any interest to the Tenant's _____ (bank name) account number _____ .

In agreement to the above terms and conditions.

Landlord's/Landlord's Representative's Signature

Name:

***NRIC / FIN / Passport No.:**

In the presence of

Tenant's/Tenant's Representative's Signature

Name:

***NRIC / FIN / Passport No.:**

In the presence of

Name:

***NRIC / FIN / Passport No.:**

Name:

***NRIC / FIN / Passport No.:**

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