

Una versión en Español de este documento está disponible en su Oficina de Gestión, en la Oficina Central del CHA o en la página web de CHA: www.cambridge-housing.org
Yon vèsyon Kreyòl Ayisyen pou dokiman enpòtan sa-a disponib nan Biwo Administrasyon-a, nan Biwo Santral CHA, epi nan sit intènèt CHA: www.cambridge-housing.org.
A versão em Português deste documento está a sua disposição no seu Escritório de Gerencia, no Local Central de Gerencia do CHA, e no Website do CHA: www.cambridge-housing.org

SECURITY DEPOSIT REFUND REQUEST FORM - PARTICIPANT

This form is to be filled out by departing residents, to request a refund of their Security Deposit. This form will be filled out and returned to the CHA upon notification of the intent to Move-out of a CHA-owned apartment.

NAME: _____

CURRENT ADDRESS: _____

MOVING DATE: _____

AMOUNT OF SECURITY DEPOSIT: \$ _____

Please forward refund to the following address:

Street Address

City

State

Zip Code

Signature

Date

Refunds will be processed by the CHA within 30 days of the termination of tenancy and will be mailed to the new address listed above. Failure to return this form could delay or prevent forwarding of your deposit to you.