



Rental Escrow Form

Please attach a copy of the Lease for which we are holding the Deposit

Property Information

Property Address:

Tenant Information

Name:

Tenant Brokerage:

Landlord Information

Name:

Listing Brokerage:

1st Deposit Amount: \$ Date: By: Check /Wire

Additional Deposit: \$ Date: By: Check /Wire

Escrow Disbursement Order & Authorization

Please have Tenant, Agent & Broker SIGN below.

Request must be received at least 5 days prior to closing.

This account does not wire out. ALL checks will be sent overnight via Fedex to the EXIT RE office

Scheduled Closing Date: Time:

Disbursement Amount: \$ HOA Approval Required: Yes No

1. Payable to: Amount: \$

2. Payable to: Amount: \$

3. Payable to: Amount: \$

Our signatures below shall constitute Tenant's Authorization and Agent's request to disburse the Deposit accordingly.

Tenant: Agent:

Broker Signature: Approving Authorization and Request