



628 George Washington Hwy.
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RENTAL ESTOPPEL

Please complete one Estoppel Certificate for **each rental unit**. Once completed, please email each fully executed Estoppel Certificate to the paralegal(s) assigned to your transaction. **Please note that this transaction will not be scheduled for closing unless we have received a fully executed Estoppel Certificate for each unit, dated during the same month as the scheduled closing.**

PROPERTY ADDRESS: _____ UNIT NUMBER: _____

OCCUPANTS

The following people are responsible for paying rent for this Unit: _____

The following people live in this Unit (including children under the age of 18): _____

Preferred tenant contact information:

Phone: _____

Email: _____

RENT

The tenant(s) pay a total of \$ _____ in rent per ☐ week ☐ month ☐ other: _____

The tenant(s) pay rent to:

Name: _____

Address: _____

Rent is due on the _____ day of the ☐ week ☐ month ☐ other: _____

The last time the tenant(s) paid rent was _____

Is this Unit subject to rental forgiveness? ☐ No ☐ Yes, through what date? _____

SECURITY DEPOSIT

The tenant(s) paid a security deposit in the amount of \$ _____ to the landlord.

UTILITIES

Utilities are paid by the following:

Heat: ☐ Landlord ☐ Tenant
Electricity: ☐ Landlord ☐ Tenant
Sewer: ☐ Landlord ☐ Tenant

Gas: ☐ Landlord ☐ Tenant
Water: ☐ Landlord ☐ Tenant

PARKING

The tenant(s) have the following designated parking spot(s): _____

APPLIANCES

The tenant(s) own or lease the following appliances (ex: stove, portable air conditioner, dishwasher, washer/dryer, etc.):

_____ Tenant	_____ Date	_____ Seller	_____ Date
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_____ Tenant	_____ Date	_____ Seller	_____ Date
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_____ Tenant	_____ Date	_____ Seller	_____ Date
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_____ Tenant	_____ Date	_____ Seller	_____ Date
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Acknowledgment of Receipt of Buyer

The undersigned Buyer(s) acknowledge receipt of this form.

_____ Buyer	_____ Date
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_____ Buyer	_____ Date
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_____ Buyer	_____ Date
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_____ Buyer	_____ Date
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