

NOTICE OF CLAIM AGAINST SECURITY DEPOSIT

TO:

Tenant's Name

FROM: _____

RE: _____
Address

DATE: _____

City, State, Zip Code

This is a notice of _____ intention to impose a claim for damages in the
amount of \$ _____ upon your security deposit, due to: (provide reason for imposing the claim below)
(Landlord's Name)

It is sent to you as required by s. 83.49(3), Florida Statutes. You are hereby notified that you must object in writing to this deduction from your security deposit within 15 days from the time you receive this notice or I will be authorized to deduct my claim from your security deposit. Your objection must be sent to _____
(landlord's address)

Signature

Landlord Name/Property Manager (Circle One)

Address

City, State, Zip

Telephone Number

I certify that a copy of this notice was sent to the above tenant at their last know mailing address:

Address

City, State, Zip Code

via certified mail number _____ on this _____ day of
_____ 200__.

(signed) Authorized agent of landlord for the purpose of sending this notice.