



PINION
PROPERTY
MANAGEMENT, INC.

1605 NW Monroe Ave., PO Box 1954, Corvallis, OR 97339, 541-754-1213, 541-753-4704 Fax

ROOMMATE RELEASE FORM

DATE: _____

By signing below, all tenants agree that _____

will be vacating _____

on _____.

The refundable security deposit will stay with the unit. The name of the vacating roommate will be removed from the rental agreement/lease once both the 30-Day Notice of Intent to Vacate Form and the Roommate Release Form have been received at the office of Pinion Property Management, Inc. None of the refundable security deposit will be refunded to the vacating tenant, at any time, by Pinion Property Management, Inc.

REMAINING TENANTS: Please make sure that your account is in good standing. Once you have signed this form, any unpaid repair bills, fees, rent or any other charges will become entirely your responsibility.

The remaining tenants release the above named from any further responsibility for the unit and any financial obligations that may occur.

Vacating Tenant's Signature: _____

Signature(s) of Remaining Tenant(s):

_____	_____
_____	_____
_____	_____

Signature of Owner/Agent: _____