

LEASE TRANSFER REQUEST Elmwood Properties

1420 Rollins Ave SE, Minneapolis, Mn 55414-2349 612 623 4488 www.Elmwoodproperties.com

Date: ___/___/___ (ADD APARTMENT NUMBER IS SPACE BELOW)

1701 _____ 1725 _____ 1100 _____ 918 _____ 1410 _____ 1313 _____ 837 _____ 1724 _____
1732 _____ 1720 _____ 924 _____ 817 _____ 823 _____ 829 _____ 1040 _____ 1716 _____

Whether occupying an apartment or not, resident(s) is/are obligated to pay the full amount of rent and related utilities until the specified lease ending date. However, upon Elmwood Properties written signed approval, a lessee resident may transfer the balance of his/her lease term to replacement before the lessee's lease ending date. This approval also includes agreement with the remaining residents. This form advises Elmwood Properties management of resident (s) interest or intent of moving out of his/her apartment. THIS FORM DOES NOT TERMINATE A LEASE AGREEMENT. Please complete and return this form to the administration office located at 1420 Rollins Ave SE, Minneapolis, MN 55414.

CURRENT RESIDENT(S) AGREE AND UNDERSTAND THAT:

1. He/She/They is/are fully responsible for locating and referring to management applicants to assume the balance of the lease term and that Management has no obligation to locate said applicants.
2. Prospective residents referred by residents must contact management to complete application, lease, building rules, and pay damage deposit and that management holds the exclusive right of acceptance or rejection of applicants.
3. Management keeps no waiting list of applicants, but refers inquiries immediately to available apartments.
4. This form is the only valid notification to management of current residents' intention to transfer balance of their lease term to another party. Once management has signed lease form(s) with new resident(s) for the balance of the current lease term, present resident(s) cannot change move-out date or the person(s) assuming balance of current lease term.
5. This form is valid only when signed by each current lessee of apartment and returned to the management.
6. By completing this form, residents are giving Management has the right to offer this apartment to prospective residents and to show the apartment at any reasonable hour and any advance written or verbal message is sufficient.

RESIDENT(S) MOVING Resident (s) wants to move out on: ___/___/___

Resident name	Signature	Resident name	Signature
_____	_____	_____	_____
_____	_____	_____	_____

Please check one option:

- We do not have any prospective new residents to introduce to management.
- We have a prospective group of residents to sublease our apartment and we would like to introduce to management (Please have the new group of residents contacting the management at 612-623-4488 for approval, complete documents and pay damage deposit) If residents have proposed replacement residents:

Proposed resident name	Telephone	Proposed resident name	Telephone
_____	_____	_____	_____
_____	_____	_____	_____

DAMAGE DEPOSIT: Remaining lessees claim and agree that the following items were damaged by resident moving out:

_____ (Check) if nothing damaged.

Residents understand and agree they must locate their own replacement roommates. Once residents(s) have selected the replacement residents, they MUST BE APPROVED BY MANAGEMENT. Have the new person(s) call 612-623-4488 to set a meeting with management to complete application and lease forms and pay the security deposit. Management will not approve any new resident(s) until all roommates have first agreed to the new person(s) by completing and returning this form.

Remaining lessee	Signature	Remaining lessee	Signature
_____	_____	_____	_____
_____	_____	_____	_____

PLEASE DELIVER COMPLETED LEASE TRANSFER REQUEST FORM TO ELMWOOD PROPERTIES, 1420 ROLLINS AVE SE, MINNEAPOLIS, MN 55414. YOU MAY PLACE IT IN THE MAIL SLOT.