

# **Security Deposit Refund Request**

I agree to refund the original Security Deposit paid on behalf of

\_\_\_\_\_  
(name of tenant)

to the Fond du Lac Housing Division, 932 Trettel Lane, Cloquet,  
MN 55720 when the unit is vacated.

If a portion of the Security Deposit is not returned, I will include a  
detailed statement regarding the amount deducted and for what  
purpose.

\_\_\_\_\_  
Signature of Landlord

\_\_\_\_\_  
Date

**\*\*This form must be signed and returned to FDL Housing along  
with the W-9 and the signed lease. Please call 218.878.8050 if you  
have any questions.**