

# Residency Exit Clearance Form

## Resident Information

Name

Resident ID

Room/Unit No.

Date of Entry

Date of Exit

Contact Information

## Clearance Checklist

Item/Area	Status	Remarks
Room Keys Returned	<input type="text"/>	<input type="text"/>
Furniture & Equipment	<input type="text"/>	<input type="text"/>
Utilities Cleared	<input type="text"/>	<input type="text"/>
Bills Settled	<input type="text"/>	<input type="text"/>
Other (Specify)	<input type="text"/>	<input type="text"/>

## Notes / Comments

Cleared By

Signature

Date