

DATE

TENANT NAME

TENANT ADDRESS

RE: Acceptance of Premises

Dear TENANT NAME:

The effective date of the Lease Agreement between “OWNER” and “TENANT” is “DATE” with the expiration date being “DATE”. We are in receipt of your security deposit in the amount of $xxx.xx. Your first month’s rent has been “abated/pro-rated”, therefore beginning “DATE” please begin making your monthly payments of $xxx.xx. All rent is due and payable on or before the first. **All checks should be made payable to “NAME” and mailed to Property One, Inc., Department #xxxxxx, 3500 N. Causeway Blvd., Suite 600, Metairie, LA 70002.** **NO INVOICES WILL BE SENT**. Please acknowledge your acceptance of these terms by signing where indicated below, returning two letters to our office and retaining one for your records.

As stipulated in the lease agreement, please have your insurance carrier forward to the management office, a copy of your insurance coverage naming “OWNER”/Property One, Inc. as additionally insured. Also, if you have not already provided us with a copy of your certificate of occupancy, please mail a copy to the management office.

Should you have any questions or problems concerning your suite, please contact me or “ASSISTANT” at “PHONE NUMBER”. We look forward to a long and lasting relationship.

Sincerely,

“PROPERTY MANAGER”

Property One, Inc. as agent for “PROPERTY NAME”

AGREED AND ACCEPTED: DATE: Authorized Signatory