

NOTICE TO VACATE

Date: _____

Resident Name: _____

Housing Authority Address: _____

Forwarding Address:

I do hereby serve my thirty (30) day notice to vacate the above address in accordance with my Lease agreement. My required vacate date is: _____.

I understand that once this notice is executed I will be obligated to vacate on the date specified. I understand that I am responsible for my prorated rent amount, plus any other charges on my account.

Office calculation:
Prorated rent: From _____ to _____ at \$ _____ per day for _____ days. Approximate Prorated Rent: \$_____ Cable charges are: \$_____.

I understand that I will be billed for any charges that are not covered by my security deposit of \$ _____. These charges will be billed to me at the forwarding address above. Contact the Housing Authority of Murray to make payment arrangements if you have a balance due. Otherwise, your account will be turned over to the Credit Bureau for collections.

Per the vacate date above, my signature below authorizes the HAM to dispose of all personal items left in the unit. I further understand that I will be charged for this removal.

In addition, I understand that the HAM has 60-90 days in which to return my security deposit minus outstanding charges. I understand that rent charges continue beyond the date stated above if the keys are not turned in by the vacate date above.

Resident Signature: _____ Date: _____

Office Use Only:
Date notice was received: _____ Staff Initials: _____
Keys Returned on: _____ By Whom: _____ Staff Initials: _____