7-DAY NOTICE OF TERMINATION OF TENANCY (NONPAYMENT OF RENT)

TENANT(S): _____ DATE:_____
(AND ALL OTHERS)
ADDRESS: _____ UNIT: _____
CITY: _____ STATE: _____ ZIP: _____

7-DAY NOTICE OF TERMINATION OF TENANCY (NONPAYMENT OF RENT)

Your rent has not been paid when due. This is your 7-day written notice of termination due to your failure to pay rent in the amount of $_____. If you fail to pay rent within the seven day period provided after service of this notice, your tenancy is terminated is on _____ (Date) at midnight (end of day).

If you fail to pay the rent as specified above, you must quit the premises no later than the date and time of termination of the tenancy specified above.

If the tenancy terminates and you continue to occupy the premises, the landlord may commence a civil action to remove you and recover possession.

Service Method:

___ Personal delivery

___ Left at the premises in case of absence from the premises, or

___ Registered or certified mail*

*Three days must be added to the number of days in the termination period set forth above.

_____ _____
Landlord Phone

PREVIEW ONLY

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