30-DAY NOTICE OF TERMINATION OF TENANCY

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

30-DAY NOTICE OF TERMINATION OF TENANCY

You are hereby notified that your month-to-month rental agreement and tenancy for the premises and dwelling unit located at:

_____
(Address)

shall be and is terminated on _____ (Last day of the applicable rental period).
(Date)

Please note that you remain liable for rent through _____.
(Date)

_____ _____
Landlord Phone

Method of Service: Personal Service:____ Certified or Registered Mail:____*
*** Five days have been added for cure or termination if notice has been served by certified or registered mail.**

PREVIEW ONLY

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