

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 _____ (Date)

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

Landlord Phone

Method of Service:

Personal Service: _____

Substitute Service and Mailing: _____ *

Post and Mail Service: _____ **

Certified/Registered Mail: _____

* To be used after attempting to serve at the tenant's home and any known place of employment.

** To be used after attempting service as described above and no person of suitable age can be found at the residence.