60-DAY NOTICE OF TERMINATION OF TENANCY

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

60-DAY NOTICE OF TERMINATION OF TENANCY

You are hereby notified that your at-will 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

PREVIEW ONLY

©2011 NO PORTION of this form may be reproduced without written permission.