# 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 _____ (This date must be at the end of the monthly rental period).
(Date)

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

_____ _____
Landlord Phone

Method of Service: Personal Service:____ Substitute Service (delivered to person over 12 years old and residing in dwelling) _____ Posting at the dwelling _____ Mail:_____*

*** Notices served by Mail shall be deemed served 2 days after being deposited in the U.S. mail postage prepaid and addressed to the Tenant**

PREVIEW ONLY

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