NOTICE OF TERMINATION OF TENANCY FOR NONPAYMENT OF RENT

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

NOTICE OF TERMINATION OF TENANCY FOR NONPAYMENT OF RENT

This is your 10-day written notice to pay your past due rent by _____ or your rental agreement and tenancy at: (Date)
_____is terminated.
(Address)

$_____ (Current Rent)
$_____ (Past Due Rent)

Total to Cure Notice: $_____

_____ _____
Landlord Phone

_____
Payment Address

Method of Service: Personal Service:_____ Post _____ Mail:_____*

*** Notices served by Mail shall be deemed served 3 days after being deposited in the U.S. mail postage prepaid and addressed to the Tenant**

PREVIEW ONLY

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