NOTICE OF TERMINATION OF TENANCY

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

This is your one month written notice of termination for the following breach of your rental agreement:

_____

To cure the breach of your rental agreement you must do the following:

_____

If you fail to cure the above breach of your rental agreement within one month of your receipt of this notice your rental agreement and tenancy at :

_____
(Address)

is terminated.

Date for Cure or Termination: _____
(Date)

_____ _____
Landlord Phone

_____
Landlord Address

Service:

____ Personal Delivery

____ Left at usual place of abode w/family member over age 14

____ Certified Mail

____ Regular mail, if certified mail has not been claimed

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PREVIEW ONLY