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 Delivery:___* Personal Delivery to the premises and posting:___** Mail Service:___***

*** To the tenant or another person residing in the premises who is at least 16 years of age.**
**** Affixing to the inside of the main entry door.**
***** May be regular, registered mail or certified mail return receipt requested.**

PREVIEW ONLY

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