

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.**