

Office Use Only (Date Received /Initials): _____



Notice to Vacate

Circle your building: (Chateau / Marcy Park / Marshall / Franklin / Cole / Fourth Street)

Apartment #: _____

Vacate Date: 8:00 A.M on _____

Apartment/Townhome Size: _____ Rent Paid: _____

Contact Phone Number (to alert your apartment of showings): _____

Reason for moving: _____

- This Notice to Vacate must be signed by **all** parties to the Occupancy Agreement. If a Notice to Vacate is submitted to the office which does not have the signatures of all adult residents of the apartment named in the Occupancy Agreement (either original signatories or added by change of roommate forms), the notice will not be considered valid.
- This signed Notice to Vacate must be in the office **before** the last working day of the month prior to the Notice Period stated in your Occupancy Agreement. (For example, if the Notice Period is 60 days, and the lease termination or desired move-out date is December 31st, the Notice to Vacate must be submitted no later than the last business day of October). Failure to submit notice within the proper time will extend the resident’s liability to pay rent equal to the Notice Period. **This means that even if your lease ends, but you failed to submit proper notice, you will be required to pay rent for a period equal to the Notice Period or until the apartment is rented by a new lessee, whichever comes sooner.**
 - Responsible for rent through: _____
- A pre-vacate inspection will be conducted after the Notice to Vacate has been received in the office. The purpose of the inspection is to assess any repairs needed to prepare the unit for the next residents. We will notify you when the inspection will take place.
- Final inspections will be conducted **after** the resident(s) have turned in all set of keys and moved out.

Each lessee must print and sign this intent to vacate notice:

Print Name(s)	Signature(s)	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please see reverse to provide forwarding address(es) for security deposit refund →

Please check which option you would like for the return of your security deposit:

Security Deposit Refund Option 1 – Request for One Check

I/We acknowledge and request that the amount refunded (including the initial security deposit with interest minus any deductions for remaining balances, cleaning or damage charges, and/or unpaid utility bills) will go to the resident indicated in the **first** box below. Other lessees must sign below to authorize this option:

Print Name(s)	Signature(s)	Date

Security Deposit Refund Option 2 – Request for Separate Checks

We request separate checks for our security deposit refund. We acknowledge that the amount refunded (including the initial security deposit with interest minus any deductions for remaining balances, cleaning or damage charges, and/or unpaid utility bills) will be split evenly between all persons signed below.

Apartment #	
Name	
Date	
Forwarding Address	
Signature	

Apartment #	
Name	
Date	
Forwarding Address	
Signature	

Apartment #	
Name	
Date	
Forwarding Address	
Signature	

Apartment #	
Name	
Date	
Forwarding Address	
Signature	

Apartment #	
Name	
Date	
Forwarding Address	
Signature	