

NOTICE TO VACATE

Date of Submission: _____

Resident(s) Name: _____

Property Name: _____

Property Address: _____ Unit: _____

PLEASE CONSIDER THIS OUR THIRTY (30) DAY NOTICE OF INTENT TO VACATE THIS UNIT ON

_____, _____,
Month Day Year

FORWARDING

ADDRESS:

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Contact Phone Number: _____

Notice of Right to Initial Inspection: We will perform an inspection (preferably with you present) once you have vacated the property, however you do have the right to request an initial inspection of your unit and be present during that inspection, which shall occur no earlier than two weeks before the termination of the tenancy and during normal business hours. I also understand that at this initial inspection, the owner/agent will provide an itemized statement (move-in/move-out report) specifying repairs or cleaning that are proposed to be the basis for the deductions from the security deposit. I understand, however that this may not be a final accounting of deductions from my security deposit. I understand, that no later than two-four weeks (14-30 days) after the owner/agent has regained possession of the premises, owner/agent shall provide me with an itemized statement, indicating the basis for, and the amount of, any security received and the disposition of the security and shall return any remaining portion of such security deposit to Resident. **(check only one option below)** I decline the initial inspection. I request the initial inspection of my unit, and I wish to be present. I request the initial inspection of my unit, but I will not be present. I request the standard inspection (once the unit is vacated), and will be present.

Best number to reach me at to arrange for the inspection: _____

Reason for Moving (select/circle one or all that apply):

Buying More Space Downsizing Budget Maintenance

Other:

**THE SECURITY DEPOSIT CANNOT BE USED AS THE LAST MONTH'S RENT.
PLEASE MAKE SURE YOU RETURN THE PROPERTY TO US ACCORDING TO
THE VACATING INSTRUCTIONS TO ENSURE RETURN OF SECURITY DEPOSIT.**

Resident

Signature Resident Signature

I. MOVE OUT CLEANING INSTRUCTIONS TO TENANT

KITCHEN

1. Clean refrigerator, shelves, crisper, under crisper, and under foot guard and refrigerator. **LEAVE RUNNING.**
2. Clean cupboards, under sink, tile, exhaust fan, and faucet fixtures.
3. Clean under burners and drip pans, clean drip pans and burner rings
4. Clean oven -be careful oven cleaner does not drip below or on floor.
5. Clean floor.

LIVING ROOM AND DINING ROOM

1. Carpet cleaning will be scheduled by management.
2. Baseboards cleaned, and finger marks or other marks cleaned off all switches and walls.
3. Window sills cleaned, windows washed, and screens washed or cleaned.
4. Travers rods cleaned, louvers, valances and mini blinds cleaned.
5. Remove Stick-on picture hangers by first wetting and then removing -do not rip off.

BEDROOMS

1. Same as living room and dining room.
2. Closets vacuumed, and closet hangers removed.

BATHROOM

1. Tub, toilet tank, vanity, bowl and cupboard cleaned.
2. Clean chrome fixtures throughout, also exhaust fan.
3. Medicine cabinet wiped and cleaned.
4. Tile cleaned.
5. Clean floor
6. Clean shower, shower doors, and shower door runners.

GENERAL

1. All light bulbs and smoke detector battery must be working.
2. Clean all light bulb covers and fixtures.
3. Turn in all keys
4. Makes sure management has a forwarding address to send any remaining deposit.
5. Please do not leave furniture in apartment or discard any large items in trash bins or leave near trash bins.
6. Please remove all nails, tacks, etc. from ceiling and walls.

RESIDENT

DATE

RESIDENT

DATE

OWNER/AGENT

DATE