

# *Excel Property Management*

## Notice To Vacate Form

PROPERTY: \_\_\_\_\_

DATE: \_\_\_\_\_

NAME(s): \_\_\_\_\_

ADDRESS: \_\_\_\_\_ APT: \_\_\_\_\_

By signing below, Resident(s) hereby gives \_\_\_\_\_ days written notice to vacate the above-referenced premises and agrees to turn in all keys by 5:00 p.m. on \_\_\_\_\_ for the condition as follows:

**Initials:**

\_\_\_\_\_ Vacating premises at the expiration of the lease term. A full (30) days written notice is required prior to vacating the premises. All rent and additional fees must be paid in full prior to vacating the premises. A move-out inspection will be performed on the move-out date and you are strongly encouraged to be present for this inspection. The full amount of the security deposit will be returned only if there are no rents, fees, or damage or other charges upon move-out. A security deposit disposition will be mailed to the forwarding address listed below within (30) days of the move-out date.

**Initials:**

\_\_\_\_\_ Vacating premises prior to expiration of the lease term. A full (30) days written notice is required prior to vacating the premises. Resident(s) understands that by signing this form he/she is not relieved of any and all responsibilities under the Lease Agreement and all rent and additional fees must be paid in full prior to vacating the premises. Rent will become due and payable immediately through the end of the Lease term or until the apartment is re-leased and a new resident has moved in. A move-out inspection will be performed on the move-out date and you are strongly encouraged to be present for this inspection. The full amount of the security deposit will be returned only if there are no rents, fees, damage fees or other charges upon move-out. A security deposit disposition will be mailed to the forwarding address listed below within (30) days of the move-out date.

**Forwarding Address:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Reason For Moving:**

\_\_\_\_\_

\_\_\_\_\_  
(Resident's Signature)

Date

\_\_\_\_\_  
(Management Representative)

Date

\_\_\_\_\_  
(Resident's Signature)

Date