

Tenant's Notice to Landlord of Intent to Vacate Unit

Tenant Name (Print): _____

Tenant Name (Print): _____

Tenant Name (Print): _____

Tenant Name (Print): _____

AND ALL OTHERS.

Address: _____

I/We, the undersigned Resident(s), hereby give at least 30 days' notice to vacate the Premises according to Oregon law. I/we will be vacating the Premises on the _____ day of _____, 20_____. I/we understand that if I/we vacate the Premises prior to the end of a full 30-day notice period, I/we will be liable for rent for the entire period.

I/we will deliver possession of said Premises to Owner/Agent on that date. It is agreed and understood that after the appropriate notice, the Premises may be shown at reasonable times prior to the expiration of this notice.

Resident recognizes that failure to vacate on the date set forth above will cause Owner/Agent to suffer actual damages because of inability to gain access for maintenance or turn-over work or to allow new residents to move in. The exact amount of these damages will be difficult to determine but Resident agrees they will be substantial. Therefore, Resident agrees that if he/she fails to vacate by the date set forth above, he/she will pay Owner/Agent actual damages of \$_____ per day until possession is delivered to Owner/Agent. (if no amount is filled in, the amount shall be twice the daily rental charge).

Tenant(s) Reason(s) for Vacating the Premises: (Please check all that apply)

- | | | |
|---|--|---|
| <input type="checkbox"/> Relocation for Job | <input type="checkbox"/> Relocation for Health/Medical | <input type="checkbox"/> Relocation for Other Reasons |
| <input type="checkbox"/> Purchase Home | <input type="checkbox"/> Renting Home | <input type="checkbox"/> Place too Small |
| <input type="checkbox"/> Place too Big | <input type="checkbox"/> Better Apt / Housing | <input type="checkbox"/> Better Amenities |
| <input type="checkbox"/> Bothered by Children | <input type="checkbox"/> Bothered by Parking | <input type="checkbox"/> Bothered by Noise |
| <input type="checkbox"/> Bothered by Pets | <input type="checkbox"/> Poor Service / Maintenance | <input type="checkbox"/> Rent Increase |
| <input type="checkbox"/> Less Expensive Unit | <input type="checkbox"/> Pet Permissive Unit | <input type="checkbox"/> Other: _____ |

Any valid termination notice received from any one Resident may be considered by Owner/Agent a termination notice from all Residents.

X _____ Resident	_____ Date	X _____ Resident	_____ Date
X _____ Resident	_____ Date	X _____ Resident	_____ Date

Deposit Refunds Should be Payable To:

- All Tenants on Lease
- Specific Tenant Only: _____
(Requires ALL Tenants to Sign below)
- _____
- _____

Forwarding Address:
