

EVICTIION NOTICE FORM

NOTICE TO QUIT (EVICTIION NOTICE)

I. PARTIES AND PREMISES

This Notice is issued on the ____ day of _____, 20____.

TO TENANT(S):

(and all other occupants in possession)

FROM LANDLORD:

REGARDING THE PREMISES LOCATED AT:

Street Address: _____

City: _____ State:

_____ Zip Code:

(hereinafter referred to as the "Premises").

II. NOTICE OF TERMINATION AND GROUNDS

YOU ARE HEREBY NOTIFIED that your tenancy of the Premises is being terminated. You are required to vacate and surrender possession of the Premises, or cure the default as described below, within the notice period required by law.

This action is taken based on the following grounds (Check one):

☐ **NON-PAYMENT OF RENT (PAY OR QUIT)**

You are currently in default for the non-payment of rent.

Total Amount Due: \$ _____

Rental Period(s) Unpaid: _____

DEMAND: You must pay the total amount due or vacate the Premises within
_____ days after service of this notice.

☐ **NON-COMPLIANCE / LEASE VIOLATION (CURE OR QUIT)**

You have violated the terms and conditions of your Lease Agreement.

DEMAND: You must cure (fix) the violation described below or vacate the Premises within
_____ days after service of this notice.

☐ **NON-COMPLIANCE / LEASE VIOLATION (UNCONDITIONAL QUIT)**

You have committed a severe violation of the Lease Agreement or statutory law (e.g., illegal activity, severe damage, or repeated violations) which cannot be cured.

DEMAND: You must vacate the Premises within _____
days after service of this notice. There is no option to cure this violation.

☐ **TERMINATION OF PERIODIC TENANCY (NO CAUSE)**

The Landlord is electing to terminate your month-to-month (or other periodic) tenancy in

accordance with state law and the Lease Agreement.

DEMAND: You must vacate the Premises by the _____ day of _____, 20____ (at least _____ days from the date of this notice).

III. DETAILS OF DEFAULT

The specific details of the non-payment, lease violation, or reason for termination are as follows:

IV. INSTRUCTIONS FOR COMPLIANCE

If this Notice allows for a cure (payment of rent or fixing a violation), payment or proof of cure must be delivered to the Landlord or Landlord's Agent at the following address:

Recipient Name: _____

Address: _____

Phone Number: _____

Available Hours for Delivery: _____

V. LEGAL CONSEQUENCES

If you fail to comply with the demands of this Notice within the specified time period, the Landlord will institute legal proceedings against you to recover possession of the Premises (Eviction/Unlawful Detainer lawsuit).

In such an event, you may be liable for:

1. Statutory damages and penalties as allowed by law;
2. Past due rent and future rent until the property is re-rented;
3. Costs of repairing any damage to the Premises; and
4. Court costs and attorney's fees, if applicable under the Lease Agreement or state law.

VI. GOVERNING LAW

This Notice is drafted and issued in accordance with the laws of the State of _____ . All time periods and service methods used herein are intended to comply with the statutes of said State.

VII. LANDLORD SIGNATURE

Signature: _____

Date: _____ day of _____, 20____

Print Name: _____

Title (if applicable): _____

*

CERTIFICATE OF SERVICE

(To be completed by the person serving the notice)

I, the undersigned, hereby declare that I served a copy of the attached Notice to Quit/Eviction Notice on the Tenant(s) named above on the _____ day of _____,

20____, by the following method (Check one):

☐ PERSONAL SERVICE: **By personally delivering a copy of the Notice to the Tenant(s).**

☐ SUBSTITUTED SERVICE: **By leaving a copy of the Notice at the Premises with a person of suitable age and discretion (Name: _____) AND mailing a copy to the Tenant(s) at the Premises via First Class Mail.**

☐ POSTING AND MAILING: **By posting a copy of the Notice in a conspicuous place on the Premises (e.g., the front door) AND mailing a copy to the Tenant(s) at the Premises via First Class Mail.**

☐ CERTIFIED MAIL: **By sending a copy of the Notice via Certified Mail, Return Receipt Requested.**

SERVER SIGNATURE

Signature: _____

Date: _____ day of _____, 20____

Print Name: _____

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NOTARY ACKNOWLEDGMENT

State of _____

County of _____

On this ____ day of _____, 20____, before me,

(Name of Notary Public), personally appeared

(Name of Signer), proved to me on the basis of
satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within
instrument and acknowledged to me that he/she/they executed the same in his/her/their
authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or
the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature of Notary Public: _____

Date: ____ day of _____, 20____

(Seal)