NOTICE TO VACATE
/DELIVER UP POSSESSION FORM

Date

_____

I/We (Tenant Name/s)

_____

_____

Hereby give 28 days notice of our intention to vacate the premises known as property address

_____

On The (Date Vacating) _____

I/We Are Breaking Our Lease   YES ☐   NO ☐

Telephone Business Hours _____

After Hours _____

Mobile _____

Forwarding Address
_____

Reason for Leaving
_____

_____

Access Arrangements for Re-Leasing:

Use the agency's key   YES ☐   NO ☐

Call to arrange access   YES ☐   NO ☐

OR _____

Tenant Signature/S _____

_____

_____

_____