

NOTICE TO VACATE

If you wish to move out of your current housing unit, you must serve the property owner with the original notice to vacate and provide a copy to the Housing Authority of Fulton County. A request to transfer to a new unit will not be processed until a notice to vacate has been received by the by the Housing Authority. Please refer to your lease to determine when you should turn in your notice to vacate. **More than 30 days are recommended due to processing time.**

Please Note: You are entitled to **one (1)** extension if agreed to by your property owner/ manager. Mutual agreements to extend your notice of intent to vacate must be submitted to the Housing Authority of Fulton County no later than **five (5) business days** before the vacate date stated below.

Landlord Name: _____ Telephone: _____

Landlord Address: _____

City State Zip

This is to notify you of my intent to vacate your rental property unit located at: _____

The reason I wish to move is:

- | | | |
|--|---|---|
| <input type="checkbox"/> Proximity to work or family | <input type="checkbox"/> Proximity to public transportation | <input type="checkbox"/> In search of better neighborhood |
| <input type="checkbox"/> Better schools | <input type="checkbox"/> Larger / smaller unit | <input type="checkbox"/> Unit in foreclosure |
| <input type="checkbox"/> Landlord terminating lease | <input type="checkbox"/> Other _____ | |

In accordance with the terms of my lease agreement, I am responsible for returning your property to you in the same condition that I received it, with the exception of normal wear and tear. I will remove all personal belongings from the unit and return all keys to the landlord on or before midnight the _____ day of _____, _____.

By issuing this notice, I fully understand that I am voluntarily terminating the lease agreement and that any housing assistance payments on my behalf under the lease and contract will terminate on the vacate date as stated above. I understand that I will be fully responsible for the contract rent without housing subsidy assistance if I remain in the unit beyond the vacate date, unless a mutual agreement to extend my vacate date has been received and approved by the HAFC in the time stated above.

Please contact me at _____ so that we can arrange the walk through inspection and the return of keys to you. I may also be contacted at this number to discuss the return of my security deposit or claim against it.

Head of Household Name Head of Household Signature Date

For HAFC Use Only

Date Notice Received: _____ HAFC Representative Signature _____

