



30 Day Notice

Tenant(s): _____

Name(s): _____

Date of notice: _____

Move-out date (must be minimum of 30 days after notice is received by PPS): _____

Current address: _____

City: _____ State: _____ Zip: _____

Forwarding address: _____

City: _____ State: _____ Zip: _____

Tenant signature: _____ Date: _____

Tenant signature: _____ Date: _____

Office use only:

Date keys are returned: _____ Date Lease Term Ends: _____

Keys returned: _____

Number of garage door openers returned: _____

Missing keys/key charge (\$15 per key): _____

Pro-rated rent if due or mark N/A if none: _____

Other Notes: _____
