
THIRTY DAY NOTICE OF INTENT TO VACATE

UC SAN DIEGO, ASSOCIATED RESIDENTIAL COMMUNITY HOUSING

ALL RESIDENTS' SIGNATURES ARE REQUIRED

VACATING Resident: I (name(s) of resident(s) vacating the apartment): _____, will vacate my apartment at (address): _____ on (date): _____.

I understand that I am responsible for the rent for thirty (30) days from the date this form is received in the office, regardless of whether I have a month-to-month or a fixed term rental agreement. In the event that I am vacating in less than 30 days from the date this form is received in the office, the office will contact me to notify me of the date that I will be released from rent responsibilities once the apartment has been re-rented. I understand that if the apartment is not re-rented based on my vacate date, I am permitted to continue residing in the apartment until 30 days from the date this form is received in the office. By signing below, I certify that all applicable rental costs will be paid.

VACATING resident: _____ (Print) _____ (Signature) PID#: _____

Forwarding Address/Phone Number: _____

VACATING resident: _____ (Print) _____ (Signature) PID: _____

Forwarding Address/Phone Number: _____

NON-VACATING Resident: I (name of non-vacating resident of the apartment): _____,

will remain in the apartment. I understand and agree that if I signed my rental agreement prior to 10/1/08, then I will assume responsibility for the total monthly rent for the entire apartment on the day after my roommate vacates. I agree to select another eligible roommate within 30 days of my roommate's vacate date, during which time I am responsible for the total monthly rent; or sign an addendum to request the office assign a roommate in which case I will be released from one half of the total monthly rent responsibility 30 days from the date the addendum is received in the office. If I signed my rental agreement on or after 10/1/08, or the vacating roommate was assigned by the office, then I understand that the office will automatically assign a new roommate and I am only required to pay half of the total monthly rent for the entire apartment. By signing below, I certify that all applicable rental costs will be paid.

NON-VACATING resident: _____ (Print) _____ (Signature) PID: _____

NOTICE OF ENTRY

An office representative will enter and inspect the apartment on the 2nd business day after you have submitted this 30 Day Notice of Intent to Vacate. This allows scheduling of necessary cleaning, repairs and renovation to occur after the resident moves out. If only one resident is vacating, and this resident was originally assigned to the apartment by the office, then a representative will be inspecting and cleaning the vacated room one business day after the move out date of the vacating resident in order to prepare the room for a new resident. If only one resident is vacating the apartment, and the non-vacating resident has retained the right to locate his/her own roommate, then the office will not enter to inspect and clean after the resident moves out unless requested by the non-vacating resident.

You may request a preliminary and final move out inspection of the premises and you have a right to be present during the inspection(s). You must request the inspection at least 2 weeks prior to your move out date.

CHECKOUT PROCEDURES:

- Review the Summary of Charges included on the reverse side of this notice.
- Clean apartment thoroughly. See handbook for details.
- **Return ALL keys and parking permits to the office** (in an envelope with your name, building & apartment) during regular office hours or after hours by dropping in the mail slot at the office on the move-out date. Please do not give your keys to the new resident. This will delay the refund of your deposit. If the keys are not returned by midnight on the last day you are responsible for rent, you will be charged for a lock change.
- If applicable, arrange to have your telephone, electricity, cable TV and any additional services disconnected before you move out. Leave your forwarding address with the office and submit a change of address to the United States Postal Service to ensure your mail is forwarded.
- Any deposit refund due will be sent to your forwarding address within three (3) weeks of the date you are released from rent responsibilities, along with a copy of your move-out inspection.

FOR OFFICE USE ONLY: DATE RECEIVED: _____ RECEIVED BY: _____
PRELIM SCHEDULED FOR: _____ DATE VR RESP. FOR RENT THRU: _____ CIRCLE: FULL / ½ RATE FOR NVR

