

Notice of Intent to Vacate

Resident(s) Name:		Current Address:			
Current Monthly Rate: \$		Other Balances Owed*: \$*(if applicable)			
Move-Out Date:	Lease Expiration Date:				
Reason for Moving:		Branch of Service:			
Forwarding Telephone #: ()				
Forwarding Address:					
(Street Ada	,	(City)		(State)	(Zip)
Were you satisfied with your st	ay at The Villages at Moffe	ett & Parks? Y	'es No		
What did you like most about y	our stay?				
What did you like lease about y	your stay?				
What do you feel we can do im	prove the stay for future re	sidents?			
How do you feel The Villages a	nt Fort Irwin can communic	cate with you bet	ter?		
May we contact you regarding	stay at The Villages at Mof	fett & Parks?	Yes No		
If yes, how would you like us t	o contact you? Phone _			Email	
	f rent and initial in the space of BAH. This option may o form of a money order/cash	e provided: only be selected in nier's check before	f this form is e the end of th	submitted price	_
Prorated Rent * Prorated rent must be paid before Rent from: Rent Rate: Prorated Rent: \$	to ÷ 30 days = \$	=	_ per day		
Initial and Final Move-Out Inshome, and you have the right to inspection of your home at a rethe end of the lease date. The put to avoid charges for damages. At the repairs, items to be replaced charges to the Resident. You may take place in your absence possession of the premises, Lanany charges for damages not for below. Please note that if a sign assumed that there were no exist	to be present during that in asonable time, as noted belongoes of this inspection is that the initial inspection, the or cleaning that will be the nay make the corrections duringes for damages. You are with your consent. If applied dlord/Agent will provide yound during the final inspection report (discovered)	nspection. Upon ow, but no earlie to allow you the confidence in Landlord/Age basis for any chauring the period reference encouraged to cable, no later that ou with an itemization. Please indicrepancy list) is a	your request, or than two we opportunity to ent will provid- arges for dama following the be present do in three weeks zed disposition icate your available.	the Landlord/eeks before the correct any dedle you with an ages. This will initial inspectiuring the inspectiuring the inspection indicating the indicating	Agent will schedule an initial termination of the tenancy or efficiencies in the home in order itemized statement specifying not be the final accounting of ion through the termination of ection; however, the inspection a Landlord/Agent has regained to basis for, and the amount of, our Initial and Final Inspection
Please initial to accept the belo Initial Inspection Date:	_		•		<u>—</u>
Final Inspection Date:		Time:			
If there is a shortage of available incoming solider in a short time that the date to vacate you have	e frame that allows only fo	r the preparation	-		
Please select one of the following. If my home is assigned to the selection of the following in the selection of the following in the selection of the following in the f	o a future resident I agree to o set up an appointment.	show my home.	If this option is	s selected a repre	esentative from The Villages at
By signing this form I agree to Attachments: Surface Cleaning		-	ement and ha	ve received the	e attachments listed below.
Resident Signature	Pr	inted Name			Date
Signed by: The Villages at Moff	ett & Parks, as an agent for	r California Milit	tary Commun	ities, LLC	

_____ Date _____

Management Signature ______ Printed Name ____