

Resident Name(s)						
Address	Unit		City	State	Zip	
ursuant with RC\	W 59.18.200, this is not	ice to vacate at l	east 20 days prior to the	he last day of the renta	al period and will va	cate by
his	day of	20				
(date)	day of (mont	, 20_ h)	(year)			
The forwarding ac	ddress for the deposit w	ill be:				
Resident Name(s)						
Address				City	State	Zip
Acknowledgment						
All residents, signo Fenants.	ed below, give permissi	on to the Owner	/ Agent to enter the u	ınit given proper notic	e for purposes of sh	owing to perspective
	day of		20			
DATED HIIS	day of (date)	(month)	20 (year)			
RESIDENT			-			
RESIDENT			_			

RESIDENT