



**UPTOWN**  
RENTAL PROPERTIES, LLC

## EARLY LEASE TERMINATION

\*Each lessee needs to fill out a separate form\*

Name \_\_\_\_\_

Address \_\_\_\_\_ Apt # \_\_\_\_\_ Phone Number \_\_\_\_\_

### Please select one of the following options:

- ☐ I will not be moving into the apartment I have signed a lease for. I understand I will be charged a termination fee equal to \$500.00, advertising costs and leasing concessions of \$300.00, and I will owe full rent and utilities until my apartment is re-rented or through the end of the term.
- ☐ I am moving out on \_\_\_\_\_ whether or not my apartment has been re-rented. I understand I will be charged a termination fee equal to \$500.00, advertising costs and leasing concessions of \$300.00, and I will owe full rent and utilities until my apartment is re-rented or through the end of the term.
- ☐ I can move out as early as \_\_\_\_\_, but I plan to stay in my apartment until it is re-rented. I need \_\_\_\_\_ week(s) notice to move out if you find a new renter. I understand I will be charged a termination fee equal to \$500.00, advertising costs and leasing concessions of \$300.00, and I will owe full rent and utilities until my apartment is re-rented or through the end of the term.

### Please select any of the following options that apply:

- ☐ I have found someone to take over my lease. The new lessee is going to move in to the apartment as is – no turnover is required.
- ☐ I have found someone to take over my lease. The new lessee wants to have the apartment turned and I understand I owe full turnover costs.
- ☐ I am looking for someone to take over my lease. I understand if the new lessee wants the apartment turned I will owe full turnover costs. I also understand that the above penalties will not be waived if I find someone to take over my lease.
- ☐ I want Uptown Rentals to find someone to take over my lease. I understand I will owe full turnover costs.

### Forwarding Address

Any amount owed to you will be split evenly amongst all lease holders and mailed to the address provided below within 30 days of key return.

Address \_\_\_\_\_ Apartment # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

\_\_\_\_\_  
Resident Signature

\_\_\_\_\_  
Resident Printed Name

\_\_\_\_\_  
Date