

EVICTIION NOTICE

3-Day Notice to Pay Rent or Quit

_____, 20____

To: _____

Rental Property: _____, City of _____, FL _____

YOU ARE HEREBY NOTIFIED THAT, under the terms of the lease agreement dated _____, 20____ (the "Lease") for the rent and use of the premises listed above now occupied by you:

Your rent for the period from _____, 20____ to _____, 20____ is PAST DUE. You are indebted to me in the sum of \$_____, and **I demand payment of the rent or possession of the premises within:** (Check one)

- 3 days** (the minimum required by law)
- _____ **days** (number of days stated in original lease agreement)

(excluding Saturday, Sunday, and legal holidays) from the date of delivery of this notice, to with **on or before** _____, 20____. The sum represents the following amounts:

Rent past due: \$_____

Late fee: \$_____

Total Amount Past Due \$_____

You are further notified that if you do not pay the total amount past due or vacate the premises by such date, legal action may be initiated against you.

Payment must be made: (Check one)

In personal at the landlord's address. Payment must be made in person at the address below between the hours of ____:____ AM/PM to ____:____ AM/PM, on: (Check all that apply)

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday

Saturday

Sunday

By mail to the landlord's address. Payment must be made by mail to the address stated below.

Other: _____.

THIS IS A: (Check one)

3 DAY NOTICE. (the minimum required by law)

_____ **DAY NOTICE.** (number of days stated in original lease agreement)

THIS NOTICE IS PROVIDED TO YOU IN ACCORDANCE WITH THE LEASE AND FLORIDA STATUTES §83.56(3). NOTHING IN THIS NOTICE IS INTENDED OR SHALL BE CONSTRUED AS A WAIVER BY THE LANDLORD OF ANY RIGHTS OR REMEDIES THE LANDLORD MAY HAVE UNDER THE LEASE OR UNDER STATE OR FEDERAL LAW.

Landlord Signature

Date

Landlord Name: _____

Address: _____, City of _____, State of _____

Phone Number: _____

PROOF OF SERVICE

I, the undersigned, being at least 18 years of age, declare under penalty of perjury under the laws of the State of Florida, that on _____, 20__, I served a true copy of the attached Notice of Termination in the following method:

Personal delivery to _____ at the following address: _____
_____.

Substituted delivery left with/at _____ at the following address: _____
_____.

Posted delivery at the following address: _____
_____.

Registered mail, return receipt requested to _____ at the following address: _____
_____.

Certified mail, return receipt requested to _____ at the following address: _____
_____.

Signed by: _____
Print Name: _____
Date: _____