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Lake Mary, FL. 32795-4046

MOVE-OUT NOTICE

Resident(s) name(s): _____ Date: _____

Lease dates from _____ to _____

This is my (our) Notice to Vacate the leased property at _____

All residents will move out on or before the _____ day of _____ 20 _____

Reason (s) for leaving: _____

Comments about your rental experience: _____

Features I enjoyed the most were: _____

Features I did not like were: _____

1. Resident(s) asserts that the term of this lease will be fulfilled on or before the move out date.
2. Resident(s) asserts that all his belongings will be removed from the property, will completely vacate the premises, and will return all keys on or before the stated move-out date. If property is not vacated and/or keys are not returned, rent charges will continue.
3. If resident fails to vacate on or before the move out date, Resident(s) agrees to pay 3 times the daily rent for each day thereafter.
4. Resident(s) understand that the security deposit paid at move-in cannot be applied as rent and that all rent and charges to the end of this lease and/or the move-out date, are the Resident's responsibility.
5. Resident(s) understands that if a change to the move-out date listed above is desired, a written request must be submitted. If approved, a copy signed by a Rental Homes, LLC representative, will be given to you.
6. Resident(s) understands that the premises must be cleaned and returned in the same conditions as when received, reasonable wear excepted.
7. According to your lease agreement, you should take good care of the inside and outside of the property and we can inspect and show the home to prospective residents during the last 45 days of your tenancy. We will give you at least a 24-hour notice that we will be showing the property. We expect your cooperation with our re-lease efforts. You must always keep the property clean and presentable. Resident(s) understands that failing to permit Owner/Agent to enter and/or show the premises, makes Residents responsible for damages in the amount of \$100.00 per event.
8. Resident(s) agrees to keep power & water in their name for two (2) business days after surrendering the keys.
9. Resident(s) agrees to receive by e-mail, in lieu of certified mail, the NOTIFICATION OF INTENTION TO IMPOSE CLAIM ON SECURITY DEPOSIT. The refundable portion of the SD will be mailed to the address provided below. If there are more than 2 residents, we recommend you designate, in writing, one of the residents as the one who will receive the security deposit at his address.

E-mail: _____

Resident(s) forwarding address: _____

Cell Phone: _____ Other numbers: _____

Signature: _____ Signature _____