

RESIDENT NOTICE OF INTENT TO VACATE UNIT

UNIT ADDRESS: _____

UNIT SIZE: _____

RESIDENT NAME: _____

HEREBY SERVE NOTICE OF MY INTENT TO VACATE DWELLING UNIT LISTED ABOVE.

I INTEND TO MOVE TO:

ADDRESS: _____

CITY, STATE, ZIP CODE: _____

DAYTIME PHONE #: _____

I WILL HAVE MY UNIT CLEANED AND VACATED BY: _____

I UNDERSTAND MY ACCOUNT *WILL NOT* BE CLOSED UNTIL I RETURN THE KEYS TO THIS UNIT TO THE HOUSING AUTHORITY OFFICE.

I UNDERSTAND THAT ANY ITEM(S) LEFT IN THE UNIT AFTER I RETURN THE KEYS TO THE HOUSING AUTHORITY WILL BE DISCARDED UNLESS PRIOR ARRANGEMENT ARE MADE WITH THE HOUSING AUTHORITY OFFICE. **INITIAL HERE:** _____

MY REASON FOR MOVING IS: _____

SIGNATURE OF RESIDENT: _____

DATE: _____

PLEASE NOTE: If you are transferring to another BHA unit, you will have 3 days to move before BHA Maintenance staff will secure the old unit

BHA STAFF SIGNATURE: _____

***** BHA USE ONLY *****

HAVE KEYS BEEN RETURNED TO THE OFFICE: YES NO

HAVE ACCOUNT BEEN CLOSED OUT IN COMPUTER SYSTEM: YES NO

WAS THIS TRANSFERING A RESIDENT FROM ONE UNIT TO ANOTHER: YES NO

DATE MANAGEMENT DID MOVE-OUT INSPECTION: _____

INSPECTION COMPLETED BY: _____

LAST DATE CLIENT CHARGED FOR RENT: _____

NOTES: _____