

Central Village Self Storage LLC



Notice to Vacate Form

Please return this form to the manager when you are ready to give us notice that you will be moving out. Thank you!

Today's Date: _____

Your Name: _____

Unit Number: _____

Forwarding Address: _____

Phone Number: _____

Move-Out Date: _____

Reason for Moving: _____

For Month-to-Month Tenancies: I am aware that in accordance with my Rental Agreement, if a full 14-Day Notice to Vacate is not given prior to move out date, I will be responsible for rent for the following 14 days from your notice to vacate and my lease will end this same day. I am aware that I must leave the unit in the same condition as when I moved in and broom clean. I am aware that any cleaning, disposal of trash or left behind items, or repairs needed as a result of my negligence to the Rental after I have vacated will be billed at my expense and deducted from my security deposit.

Tenant Signatures:

Name Date

Office Use Only: Date Received: _____