

UNIVERSITY STUDENT APARTMENTS ROOMMATE INTENT TO VACATE

Resident: _____

Apartment #: _____

Moving Date: _____

Telephone #: _____

Email Address: _____

OFFICE USE ONLY:

Tenant #:

Primary Name:

Email to Primary

Rent Charged Through: ____/____/____

I hereby give the required minimum 30-day advance notice that I will vacate the apartment listed above and have notified the primary resident of my intent to vacate.

I understand that it is not possible to cancel or change this Intent to Vacate notice.

I understand that I will be responsible for at least 30 days of rent from the business day this notice is received by the Student Apartments Main Office, or through the moving date listed above, whichever is greater. Any notices received after 4:30 p.m. will be considered received the next business day.

If I vacate the apartment in less than 30 days, I accept responsibility to pay rent through the required 30 days. I understand that my right-of-entry to the apartment terminates when the keys are turned in to the primary resident, although I will still be responsible to pay rent through the full 30-day period.

Any security deposit paid is refunded to the primary resident when the apartment is completely vacated.

I understand the following:

- The apartment must be left clean and undamaged
- All keys must be given to the primary resident
- All personal belongings must be removed from common areas and storage lockers
- A forwarding address should be filed with the U.S. Postal Service (www.usps.com)
- A [Release of Information Form](#) may be submitted to the Main Office if you would like Student Apartments to verify your rental history

I hereby certify that I have read and understand this notice.

Resident Signature

Date

University Student Apartments Representative

Received Date