

NOTICE OF INTENT TO VACATE

TO: _____

FROM: _____

DATE NOTICE IS BEING GIVEN: _____

DATE I INTEND TO VACATE: _____

I DO HEREBY TENDER MY NOTICE OF INTENT TO VACATE.

THE LANDLORD SIGNATURE BELOW IS VERIFICATION THAT THE TERMS OF THIS NOTICE ARE IN CONJUNCTION WITH THE TERMS OF MY LEASE AGREEMENT.

NAME (TENANT)

NAME (LANDLORD)

DATE

DATE

The Housing Authority of the City of Charleston
550 Meeting Street
Charleston, SC 29403
Email: hcv@chacity.org
Phone: (843) 723-4491
Fax: (843) 720-5349

