



Crescent City Housing Authority
235 H Street
Crescent City, CA 95531
(707) 464-9216 Fax (707) 464-2692



30-DAY NOTICE OF INTENT TO VACATE

Today's Date: _____

FROM:

Tenant Name: _____

TO:

Landlord/Agent: _____

It is my intent to vacate the unit I am currently renting from you at:

(unit address)

My last day in the unit will be: _____

I can be reached at the following phone number: _____

Tenant Signature: _____

Landlord/Agent Signature: _____

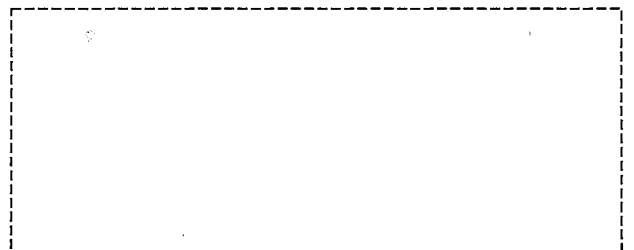
MUTUAL CONSENT OF TENANT/LANDLORD TO TERMINATE LEASE WITHIN
FIRST/INITIAL YEAR OF TENANCY

Tenant Signature: _____

Landlord Signature: _____

****I understand that I am only allowed to break my lease with a mutual consent once within a two-year period. (For example; if you are breaking your lease for the first time, you will be required to maintain your lease in your next rental unit for twelve consecutive months. Failure to do so, for any reason within your control, will result in the termination of your housing assistance.)****

Tenant Initials: _____



Received (Date Stamp)