



PROVIDENCE HOUSING AUTHORITY

100 BROAD STREET
PROVIDENCE, RI 02903-4129
TEL. (401) 751-6400
FAX (401) 351-1191

LEASED HOUSING DEPARTMENT 30 DAY NOTICE TO VACATE

In accordance with all provisions of the lease agreement, this serves as a Thirty (30) Day Notice to Vacate.

_____ Apt. _____
(address of unit under lease)

Effective Date: _____
(last day of month)

LANDLORD MUST CHECK ONE OF THE FOLLOWING:

- The Tenant currently does not owe any back rent.
- The Tenant currently owes back rent in the amount of \$_____.

This Agreement does not relieve the Tenant or Landlord of any obligations such as damages or unpaid rent.

This agreement is for the purpose of termination Tenancy, Housing Assistance Payments and Contract Responsibilities between the Owner, Tenant and Housing Authority on the above effective date.

Date

Landlord Signature

Date

Tenant Signature

Date issued to tenant: _____ Issued by: _____

RETURN THIS FORM **ONLY** ON:
TUESDAYS BETWEEN THE HOURS OF 9:00 AM AND 3:30PM
OR THURSDAYS BETWEEN THE HOURS OF 1:30-3:30 PM.

This form must be returned to the Leased Housing Department no later than _____ in order to conduct a new leasing effective _____.

NOTE: This form is valid only if issued by staff of the Providence Housing Authority 11/2015