

DATE _____ PROPERTY NAME / NUMBER Winston Apartments 568
 RESIDENT NAME(S) _____
 _____ also all other Occupants or persons unknown claiming any right or interest in the Premises.
 UNIT NUMBER _____ STREET ADDRESS _____
 CITY _____ STATE _____ ZIP _____

I/We, the undersigned Resident(s), hereby give at least 30 days' notice to vacate the above Premises according to Oregon Law. I/We will be vacating the Premises on the _____ day of _____, _____. I/We understand that if I/we vacate the Premises prior to the end of a full 30-day notice period, I/we will be liable for rent for the entire period.

I/We will deliver possession of said Premises to Owner/Agent on that date. It is agreed and understood that after the appropriate notice, the Premises may be shown at reasonable times prior to the expiration of this notice.

Resident recognizes that failure to vacate on the date set forth above may cause Owner/Agent to suffer actual damages because of inability to gain access for maintenance or turn-over work or to allow new residents to move in. These damages may include, but are not limited to: (i) the value of any rent accruing from the expiration or termination of the Rental Agreement until Owner/Agent knows or should know that Resident has relinquished possession of the unit; (ii) loss of rent due to delays in delivering possession to a new resident; (iii) any amounts owed to a new resident because of any delays in Owner/Agent's ability to provide possession; (iv) the costs of Owner/Agent's employee time dealing with the delayed delivery of possession; and (v) costs imposed by contractors and other vendors rescheduling their work. Resident will be responsible for all actual damages incurred by Owner/Agent.

Phone _____ (for permission to show Premises to prospective residents)

Reason you are leaving _____

Forwarding address _____

Any valid termination notice received from any one Resident may be considered by Owner/Agent a termination notice from all Residents.

X RESIDENT	DATE	X RESIDENT	DATE
X RESIDENT	DATE	X RESIDENT	DATE

CONFIRMATION OF RECEIPT OF 30-DAY NOTICE (OWNER/AGENT USE ONLY)

Please be advised that the **estimated** prorated charges for the month(s) of _____ are as follows:

Rent	\$	_____
Lease break fee (if applicable)	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
TOTAL	\$	_____

The following information should be helpful at the time of move-out:

1. All meters should be read as of the date of move-out.
2. All keys, cables, etc. should be returned to Owner/Agent.
3. If damage other than ordinary wear and tear is found in the unit after move-out, an itemized charge will be sent to Resident.
4. If Resident is attempting to terminate a rental agreement for a specific term without complying with a valid early termination clause, or if Resident's notice fails to comply with Oregon law in any respect, the signature of Owner/Agent does not constitute an acceptance of the termination and does not relieve Resident of all amounts due under the Rental Agreement.

This amount is subject to correction or change as part of the final accounting. Resident will remain liable for all other amounts due under the Rental Agreement.

X _____ DATE _____
 OWNER/AGENT