



HCV Program
1300 Broad Street N
Jacksonville, FL 32202
Phone: 904-552-5952
HCVCustomerService@jaxha.org
JaxHA.org

NOTICE OF INTENT TO VACATE

TENANT

Tenant ID: _____

First Name: _____ Last Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

On _____, I, _____ hereby give you, the property owner /
(today's date) (tenant's name)
agent of the above referenced property, thirty (30) days written notice of my intent to vacate the above referenced unit
on the last day of the month of _____.
(month)

I understand that if I do not move by the above date and I still wish to move from the unit:

- I must prepare and submit to JAXHA a new *Notice of Intent to Vacate*.
- I will be responsible for all rental charges incurred after the move out date listed.

Tenant Signature: _____ Date: _____

PROPERTY OWNER / AGENT

On _____, I, _____ received thirty (30) days written
(today's date) (property owner / agent's name)
notice from the above tenant to vacate the above referenced property above referenced unit on the last day of the
month of _____.
(month)

I understand that if the tenant does not move from the unit by the date listed above and they still wish to move from the unit:

- I will receive a new *Notice of Intent to Vacate* for completion.
- The tenant will be responsible for all rental charges incurred after the move out date listed.

I further confirm the above tenant (*check one*):

☐ is in good standing

☐ is not in good standing (*please explain below*)

COMMENTS: _____

Property Owner / Agent Signature: _____ Date: _____