

HOUSING AUTHORITY of the TOWN OF VERNON

21 COURT STREET VERNON, CT 06066 (860) 871-0886 • FAX (860) 875-9811

NOTICE OF INTENT TO MOVE

The Following Must Be Completed by Tenant

I,, do hereby give notice to my landlord that it is my intention to move out of the referenced unit located at:	
Date:	Tenant Phone Number:
The Following	Must Be Completed by Landlord
As landlord of the above unit, my signature	e below <u>certifies</u> that I have received the Notice of Intent to Move
from the said resident and furthermore, tha	t by signing this form, I,,
agree that said resident is hereby released t	from the referenced unit lease effective
Landlord Signature:	Date:
Landlord Phone Number:	
PLEASE BE AWARE THAT OF	NCE YOU ARE PROVIDED WITH THE INITIAL
30-DAY NOTICE, THIS	S FORM IS VALID FOR UP TO <u>60 DAYS</u> .
• When the client's new unit passes insp	pection, they will be given a move-in date. If for any reason the
client's new unit is not ready and has t	to stay beyond the move-out date indicated on this form, will you
accept a prorated rent for the number	of days the client is required to stay in the unit?
YES	NO (please check and initial)
	es not return the keys to you by the move-out date, the client will
be responsible for any due rent to you	unless the unit is in abatement.

