



## Clermont Metropolitan Housing Authority

65 South Market Street | Batavia, Ohio 45103

513.732.6010 | Fax 513.732.6520

www.clermontmha.org

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# Notice of Intent to Vacate

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Please allow this notice to serve as my 30-day written notice to vacate the premises, in accordance with my lease agreement with Clermont County Metropolitan Housing Authority.

The above mentioned address will be vacated on \_\_\_\_\_.

**I will return all of my keys to the CHMA office. I understand that I will be charged rent for each day that I remain in possession of the keys.**

**My forwarding address is:** \_\_\_\_\_

\_\_\_\_\_

**A copy of your final charges or deposit refunds will be mailed to the forwarding address. If you fail to provide a forwarding address you will automatically forfeit any deposits.**

Resident Signature \_\_\_\_\_

Resident Signature \_\_\_\_\_

Date \_\_\_\_\_