Clermont Metropolitan Housing Authority
65 South Market Street | Batavia, Ohio 45103
513.732.6010 | Fax 513.732.6520
www.clermontmha.org

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 _____

Rev 1/27/2021