



NOTICE TO PAY RENT OR QUIT

To: _____ ("Tenant") and all other occupant(s) in possession of the premises located at: ("Premises")

Street Address _____

City _____ State _____ Zip Code _____

Notice to the above-named person(s) and any other occupants in possession of the Premises. Within 3 (or [] ____ (But not less than 3)) days from service of this notice you are required to either:

- 1. Pay rent for the Premises in the following amount(s), which is now past due to Landlord/Agent: Name _____ Phone _____ Address _____

Past Due Rent: \$ _____ for the period _____ to _____
\$ _____ for the period _____ to _____
\$ _____ for the period _____ to _____
Total Due \$ _____

OR

2. Vacate the Premises and surrender possession.

If you do not pay the past due amount or surrender possession by the required time, legal action will be filled seeking damages and possession. If past due rent is not paid and you do not give up possession of the Premises, the Landlord declares forfeiture of the lease. You are also hereby notified, as required by law, that a negative credit report may be submitted to a credit reporting agency if past due rent is not paid.

Landlord/Agent _____ Date ____ / ____ / 20 ____

Address _____ City _____ State _____ Zip _____

Telephone: _____ Fax _____ Email _____

PROOF OF SERVICE

- [] I delivered the notice to the occupant personally on _____ (date)
[] I delivered the notice to a person of suitable age and discretion at the occupant's residence/business after being attempted personal service at the occupant's residence, and business, if known on _____ (date). I mailed a second copy to the occupant at his or her own residence on _____ (date)
[] I posted the notice in a conspicuous place on the property, after having attempted personal service at the occupant's residence, and business, if known, on _____ (date) and after having been unable to find there a person of suitable age and discretion. I mailed a second copy to the notice to the occupant at the Premises address on _____ (date)

I declare under penalty of perjury under the laws of the State of _____ that the foregoing is true and correct.

Name Signature Date: ____ / ____ / 20 ____