

Region XII Regional Housing Authority 320 E 7th Street, PO Box 663 Carroll, Iowa 51401

Phone: (712) 792-5560 - Fax: (712) 792-1650



NOTICE OF INTENT TO VACATE

TENANT NAME:	(Please print)
UNIT ADDRESS:	(Please print)
CITY/ZIP:	(Please print)
PHONE:	
In order to be eligible to execute this intent to vacate form agreement in your current unit as of the vacate date listed	n, you must have completed 12 months of your lease on this form.
Region XII Regional Housing Authority (RHA) requires to the RHA and the landlord of their intent to vacate. Ho outlined in their lease agreement if it differs from that of	wever, the tenant must follow the requirements
Tenant (TN) and landlord (LL) must initial the 3 statements b	pelow: (write comments on the back of form)
TN LL I agree to terminate the lease on this da	ate.
TNLL I understand I am liable for charges du my occupancy at the current address.	e to damages that were created during
TN LL I do not currently owe unpaid rent.	
I am giving my notice on an	nd will move out
The RHA will have no obligations for any rent payments after a lease extension.	the above stated date unless both parties notify the RHA o
Tenant sign	Date
Landlord sign	Date
Please check one: I wish to move within Registrance; I wish to transfer my Section 8 voucher (I do not need rental assistance at this time and wish	(go portable) outside Region XII's jurisdiction; the withdraw.
****Portability requests require addition	al documentation and procedures.

Please call the office for further instructions****