



Date received in office: \_\_\_\_\_

Received by: \_\_\_\_\_

### THIRTY DAY NOTICE

**\*\*This form must be received in our office with a minimum of 30 calendar days remaining from the date of receipt to the declared date of you move.**

**\*\*This form may be faxed to 210-657-7506, emailed to amy@moranpm.com, or delivered to our office at 19115 FM 2252, Ste. 7, Garden Ridge, TX 78266**

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

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

Contact Phone number 1: (     ) \_\_\_\_\_

Contact Phone number 2: (     ) \_\_\_\_\_

e-mail address: \_\_\_\_\_

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

By completing this form we are declaring our intention to vacate the above referenced property by \_\_\_\_\_ (date).

Our reason for leaving the property is one of the following: (please indicate reason)

\_\_\_\_\_ Military Deployment (attach orders to this form)

\_\_\_\_\_ Court Order (attach signed ruling from family court judge to this form)

\_\_\_\_\_ My lease is expiring on: \_\_\_\_\_ (date)

\_\_\_\_\_ My lease expired on: \_\_\_\_\_ (date) and we are not renewing

By signing the form below we are also declaring the following to be true:

We have completed our fulfillment for the lease term.

We will have the carpet professionally cleaned and provide a paid in full receipt to Moran Property Management

We will have the home professionally cleaned and provide a paid in full receipt to Moran Property Management provided this clause is listed in the special provisions of our lease or lease extension

We will have the carpet professionally treated with pet enzymes and deodorizers should we have a pet in the home and the receipt will reflect the treatment

We understand that any damages done to the property beyond normal wear and tear that are not claimed on our initial inventory and condition report are our responsibility to pay for

We understand that any costs associated with any damages that are our responsibility that exceed our security deposit are due and payable to Moran Property Management within 10 business days of receipt of the bill

If we fail to fulfill the terms of our lease, we understand we are financially liable.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Signature Date