



# HOUSING AUTHORITY OF THE CITY OF WATERBURY

2 Lakewood Road Waterbury, CT 06704 Phone: 203-596-2640 Fax: 203-757-7850

## **NOTICE TO VACATE**

This form **MUST BE COMPLETED 30 Days Prior to Effective Move Date**

### **TENANT CERTIFICATION**

I, (Name of Head of Household) \_\_\_\_\_ hereby give notice to vacate the residence located at the address below:

\_\_\_\_\_  
\_\_\_\_\_

I will return all keys to the Landlord/Management and all of my personal belongings and furniture will be out of the unit on **(Move Out Date)** \_\_\_\_\_.

I understand that should I need to continue to occupy the current unit after the above date I **MUST** obtain written authorization from the Landlord and submit said authorization to the Waterbury Housing Authority prior to the move out date noted above.

I understand that my request to vacate may be delayed if the Waterbury Housing Authority receives written notice from my Landlord of any unresolved lease violations. If you have lease violations or vacate the unit without notice you may be Terminated from the Program.

Family Signature: \_\_\_\_\_

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

Email: \_\_\_\_\_

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

### **LANDLORD CERTIFICATION**

By signing this notice, I the Landlord am certifying that the above tenant is up to date with his/her share of rent and is in good standing with no lease violations. If tenant has lease violations please supply written notice of such.

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

Signature: \_\_\_\_\_

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

Email: \_\_\_\_\_

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