

Resident Name(s):	Apartment #:	Date of Notice:
Move Out Date:	Was Proper Notice Given? YES / NO	
Lease Expiration Date:	If no, how many days is the notice short? _____ <b>(to be filled out by the Management Office)</b>	

Reason for Move-Out (please check one)					
<input type="checkbox"/>	Purchased Home	<input type="checkbox"/>	Rent is too High	<input type="checkbox"/>	Maintenance Concerns
<input type="checkbox"/>	Job Transfer	<input type="checkbox"/>	Unhappy with Community		<input type="checkbox"/>
<input type="checkbox"/>	Financial Reasons	<input type="checkbox"/>	Illness/Death	<input type="checkbox"/>	
<input type="checkbox"/>	Lost Roommate	<input type="checkbox"/>	On-site Transfer		
<input type="checkbox"/>	Need More Space	<input type="checkbox"/>	Transferring to Another Jupiter Community		
<input type="checkbox"/>	Moving Out of State	<input type="checkbox"/>	Military Relocation		

Forwarding Address (Required)			
Resident Name(s):			Phone:
Address:	City:	State:	Zip code:
<b>The forwarding address is required in order to process the Security Deposit Refund. Failure to provide a forwarding address will result in the delayed delivery of any refund owed to the resident.</b>			

**Please Initial the Following**

- In accordance with my lease agreement, I understand if I give less than a 60-day written notice to vacate, I will be responsible to pay rent equal to the 60-day notice. \_\_\_\_\_
- Should I choose to retract my notice to vacate, I must give the Management Office a written retraction. I understand if my apartment has already been rented to another resident, the Management Office will not be able to grant my request. \_\_\_\_\_
- I understand if I am breaking my lease early, I am responsible for paying back any concessions or discounts in accordance with my Lease Contract Buyout Addendum upon written notice to vacate. \_\_\_\_\_
- I understand I must turn in all keys, cards, remotes, pool/fitness center cards/tags, etc to the Management Office upon move out. **I also understand I will be charged rent for each additional day that keys have not been returned beyond my agreed upon move out date.** \_\_\_\_\_

By signing below, I acknowledge I have read and understand the information listed above.

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

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

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

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

Agent for Owner \_\_\_\_\_ Date \_\_\_\_\_