

Pay or Quit Notice

Date:

To:

Address:

City, State, ZIP:

Dear Tenant:

This notice is to inform you that you are in default of your rent payment for the property located at:

Rental Property Address:

Amount of Rent Due:

Period Covered:

Please be advised that unless payment in full for the amount specified above is received within _____ days from the date of this notice, your tenancy will be terminated and legal proceedings may be instituted to recover possession of the premises and for the rent owed.

Payment must be made to the following address:

Payment Address:

If you have already made this payment, please disregard this notice.

Sincerely,

Landlord/Agent Name:

Signature:

Contact Phone/Email:

Note: Retain a copy of this notice for your records.

