

**NOTICE OF INTENT TO VACATE**

Lease Holder's Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

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Address vacating: \_\_\_\_\_ Date vacating: \_\_\_\_\_

Reason for moving: \_\_\_\_\_

\_\_\_\_\_

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

*Street* *Street*

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*City* *State* *Zip* *City* *State* *Zip*

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**PCS Destination:** \_\_\_\_\_

**MOVE-OUT TERMS & CONDITIONS**

\_\_\_\_\_ A Final Inspection appointment will be conducted once the home is vacated. The community representative will submit a final inspection form and a cost estimate of damages to the resident at the time of the move-out inspection. Additional damages may be assessed after move-out in accordance with the Lease Agreement. Residents will be required to pay for damages directly to the Community at the time of move-out. All damages must be paid for with certified funds, mac allotment, or credit or debit card on the date of move-out.

\_\_\_\_\_ I have received a copy of the move out procedures and cost estimate list. I understand the condition the home must be in when possession is returned to Management.

\_\_\_\_\_ Resident acknowledges that the move-out date is a definite date. A request for a cancelation or extension of this Notice to Vacate must be made in writing for consideration. If the home is leased to another resident, it may not be possible to move the final inspection appointment. If it is approved to move the final inspection appointment, it will be scheduled on the next available appointment which may be one or more business days beyond the original appointment. If the home is not vacated on the move-out date specified above, the Resident is liable for damages, cleaning and rent up to and including the actual move-out date. In addition, there may a one-time missed appointment fee of \$50.

\_\_\_\_\_ I understand if I choose to have my allotment stopped prior to vacating my home, I must pay any outstanding monies via certified funds to include damages owed by the first (1) of the month I plan to vacate.

\_\_\_\_\_ I understand and have read the transfer policy and agree to the maintenance recovery fee.

***I grant authorization to share my contact information with other PPV partners for the purposes of assistance in housing relocation:  Yes  No***

**Are you interested in earning money with Hunt's Resident Loyalty Program?  Yes  No**



**Residents moving to another Hunt community will be rewarded for their loyalty at lease signing at the new duty station:**



- \$100 credit to the resident ledger at the new duty station
- Or \$200 credit off of the first month's rent at your new duty station if you sign your lease in advance\*

Early Termination Fee: \_\_\_\_\_  
 Maintenance Recovery Fee: \_\_\_\_\_  
 Move and Go Fee: \_\_\_\_\_  
 Prorate/Other: \_\_\_\_\_  
 Estimated Utility Payment: \_\_\_\_\_  
 Other: \_\_\_\_\_  
**TOTAL ESTIMATE:** \_\_\_\_\_

Pre-inspection date & time: \_\_\_\_\_  
 Final Inspection date & time: \_\_\_\_\_  
 Final Rent Due Date: \_\_\_\_\_

I (we) have read the Notice to Vacate in its entirety and agree to the terms, in addition to the lease agreement. The above charges are not inclusive of any damage fees or other fees that may be incurred between the notice to vacate submission and the actual move-out date.

**ALL PERSONS APPEARING AS LEASEHOLDERS ON THE RENTAL AGREEMENT MUST SIGN BEFORE THIS NOTICE TO VACATE CAN BE CONSIDERED VALID.**

|                    |              |       |
|--------------------|--------------|-------|
| _____              | _____        | _____ |
| Resident Signature | Printed Name | Date  |
| _____              | _____        | _____ |
| Resident Signature | Printed Name | Date  |
| _____              | _____        | _____ |
| Resident Signature | Printed Name | Date  |
| _____              | _____        | _____ |
| Resident Signature | Printed Name | Date  |
| _____              | _____        | _____ |
| Manager Signature  | Printed Name | Date  |

|  |
|--|
| <p><b>OFFICIAL USE ONLY:</b> Received by: _____ Date Received: _____</p> <p>Orders Received: <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>      Date Orders Received: _____</p> <p>Entered Notice in Yardi: _____ Added PCS Destination for PPV Lead Share in Yardi: _____</p> <p>Moving to HMC Duty Station <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>      Sent Email to new HMC Location: _____</p> <p>Proper Notice: _____ Improper Notice: _____      Rental Agreement Termination: _____</p> <p>Branch of Service: <input type="checkbox"/> <b>USAF</b>    <input type="checkbox"/> <b>Army</b>    <input type="checkbox"/> <b>Navy</b>    <input type="checkbox"/> <b>USMC</b>    <input type="checkbox"/> <b>USCG</b></p> <p>DISTRIBUTION: <input type="checkbox"/> Resident File <input type="checkbox"/> Uploaded into Yardi as an attachment</p> |
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