



Housing Authority of the City of Decatur, Georgia

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404-270-2100 ▪ Fax 404-270-2122
TTD/TTY 1-800-545-1833 Ext 852
www.decaturhousing.org

SIXTY (60) DAY NOTICE TO VACATE

I, _____, hereby give a sixty (60) day notice to vacate the residence located at:

I will return all keys to the landlord and all of my personal belongings and furniture will be out of the unit on:

(Move-Out Date)

My reason(s) for vacating this unit is/are: _____

PLEASE NOTE:

1. THE NOTICE TO VACATE WILL BE EFFECTIVE ON THE LAST DAY OF THE MONTH, SIXTY (60) DAYS AFTER THE DATE YOU SUBMIT THIS NOTICE. (EXAMPLE: IF YOUR VACATE NOTICE IS SUBMITTED ON 5/4/17, YOUR SIXTY DAY NOTICE WILL BE EFFECTIVE 7/31/2017.)
2. IF YOU OWE MONEY TO DECATUR HOUSING AUTHORITY OR ANY OTHER HOUSING AUTHORITY, YOU WILL NOT BE PERMITTED TO PORT TO ANOTHER HOUSING AUTHORITY JURISDICTION.
3. IT IS YOUR RESPONSIBILITY TO CONDUCT A MOVE-OUT INSPECTION WITH YOUR LANDLORD AND PAY ALL TENANT RENT OWED THROUGH THE MOVE OUT DATE.

THE EFFECTIVE DATE OF THE NEW CONTRACT CANNOT BE EARLIER THAN THE DAY AFTER THE MOVE-OUT DATE INDICATED ABOVE OR MOVE-OUT EXTENSION DATE.

TENANT NAME: _____ Phone Number: _____

(Signature) Date: _____

Email Address: _____

LANDLORD NAME: _____ Phone Number: _____

(Signature) Date: _____

Email Address: _____