

Dartmouth Real Estate Representative

## NOTICE TO DARTMOUTH COLLEGE REAL ESTATE OFFICE OF INTENT TO VACATE

Please take a few moments to complete the following information regarding your intent to vacate your apartment home. Please note, your notice to vacate will not be considered valid until this form is completed and submitted. Move out Date: Resident Name: Unit Address: \_\_\_\_\_ Resident Name: \_\_\_\_\_ FORWARDING ADDRESS \*Please note, a forwarding address is required in order to process your security deposit refund. If unsure of forwarding address at this time, please be sure to confirm prior to move out. I understand and give my permission for my unit to be shown for pre-leasing purposes during regular business hours, Monday thru Friday. I understand that I will receive notification prior to any showing being scheduled. (Initials) I further understand that the following terms and conditions, as specified in the lease, must be met in order to receive any portion of my security deposit refund. 1. The apartment must be left in the same condition as when it was rented, less reasonable wear and tear. Any additional cleaning or maintenance required will be charged accordingly. 2. This notice may not be rescinded nor may the date of vacating change without written confirmation from the Real Estate Office. **3.** I agree to be responsible for any incurred utility bills through the vacate date or lease end date, whichever is later. **4.** The full term of the lease shall have expired and if not, I agree to pay all applicable termination fees. 5. All door keys, access cards, mailbox keys, and storage keys issued will be returned to the Office. Any keys lost or not returned will be charged for a complete lock change. Please see lease for charges. **6.** Please refer to your lease regarding notice requirements. I (We) have read the above terms and agree to them. Resident Signature Resident Signature Date Date

Date Received