COLORADO
Department of Local Affairs
Division of Housing

30-DAY NOTICE

Rental Assistance Programs

I, _____ am giving my 30-day notice that I will vacate
Print Name

the unit at: _____
Address

I will be out of the unit and will turn the keys in on _____
Date

I am moving for the following reason(s):

_____

_____

_____

_____	_____	_____
Participant Signature	Date	Telephone Number

Section to be completed by Landlord

☐ I accept the above 30-day notice to vacate.

☐ I do not accept the above 30-day notice, for the following reasons:

_____

_____

_____

_____	_____	_____
Landlord Signature	Date	Telephone Number

Please return this form to: _____

_____

_____