Trio
PROPERTY MANAGEMENT INC.
1000 Willagillespie Road, Suite 206
Eugene, OR 97401
541.434.1900 ph. 541.434.1901 fax

30 Day Notice to Vacate

Date _____

Property Address: _____

Address for Deposit Accounting: _____

Reason for moving: _____

I/We hereby give at least 30 days notice to vacate the above residence according to Oregon Law. I/We will be vacating our residence and returning all keys to our unit by 11:59 PM on:
_____(month) _____(day) _____(year) to Trio Property Management Inc. office.

*Please note, all tenants sign this form.
*Physical addresses only. No P.O. Boxes.

_____ _____ _____
Tenant Name Tenant Signature Date

_____ _____
Phone Number Forwarding Address

_____ _____ _____
Tenant Name Tenant Signature Date

_____ _____
Phone Number Forwarding Address

_____ _____ _____
Tenant Name Tenant Signature Date

_____ _____
Phone Number Forwarding Address

_____ _____ _____
Tenant Name Tenant Signature Date

_____ _____
Phone Number Forwarding Address

Upon receipt of this 30 day Notice to Vacate, a move out packet will be mailed to you with information to help you with your move-out process and to maximize your deposit refund.