

**OCCUPANT TERMINATION NOTICE**  
**The University of Texas at Arlington - University Apartments and Houses**

**I hereby give notice of termination of my lease agreement for the property described below:**

<b>Street Address of Property:</b>	Arlington, Texas		
<b>Community Name:</b>		<b>Apt #:</b>	
<b>Lease Termination Date (Move Out Date) – Must vacate by 5:00pm:</b>		____ / ____ / ____	

Please initial by each statement signifying you understand and agree to comply with the following:

- \_\_\_\_\_ The University shall only accept written termination notice. Verbal or other notice is not sufficient.
- \_\_\_\_\_ I must obtain a signed copy of this notice acknowledging receipt by The University.
- \_\_\_\_\_ If there are multiple occupants on the lease, this notice of termination shall serve as notice for all.
- \_\_\_\_\_ Refund of the security deposit is subject to compliance with the terms and conditions of the lease agreement. Failure to provide a written notice at least 30 days prior to the desired lease termination date will be just cause for forfeiture of the security deposit.
- \_\_\_\_\_ I may be responsible for cost-of-reletting charges for early termination of the lease agreement.
- \_\_\_\_\_ This termination notice is binding, non-changeable, non-cancelable and the premises must be fully vacated and all items of personal property removed from the premises on or before the lease termination date.
- \_\_\_\_\_ The University and new residents may rely on this notice. The University may clean, repair and relet the residence for occupancy on the day after the lease termination date. In accordance with the terms and conditions of the lease agreement, I may be responsible for holdover rent charges, liquidated damages, and other expenses if any occupant holds over and fails to vacate on or by the lease termination date.
- \_\_\_\_\_ I am subject to all contractual and statutory remedies for violation of the lease, including damages, attorney fees, late payment charges, cost of reletting charges, hold over charges and other expenses.
- \_\_\_\_\_ I am required to schedule a move out inspection appointment with my RA at least 5 days prior to the move out date listed above. Failure to schedule an appointment, meet for the appointment, or follow the move out procedures outlined in the Move Out Guide may result in improper check out fees.
- \_\_\_\_\_ I am required to vacate the apartment no later than 5:00pm on the move out date listed above.

Yes  No  I have received a copy of the UTA Apartment and Houses Move Out Guide.

Yes  No  My roommate desires to assume this lease.  
 (If yes, you must complete a Lease Assumption Application Packet today.)

<b>Reason for Leaving:</b>
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<b>Lessee Name:</b>		<b>Student ID</b>	1 0 0 0 _____
<b>Forwarding Address:</b>			<i>Residents are responsible for providing the university with their forwarding address via MyMAV.</i>
<b>City:</b>		<b>State:</b>	<b>Zip Code:</b>
<b>E-mail Address:</b>			
<b>Primary Phone:</b>	_____ - _____ - _____	<b>Secondary Phone:</b>	_____ - _____ - _____
<b>Lessee Signature:</b>		<b>Date:</b>	____ / ____ / ____

**OFFICE USE ONLY**

<b>Notice Received By:</b>		<b>Date Received:</b>	____ / ____ / ____
<b>Community Code:</b>	_____ - _____	<b>Lease Begin:</b>	____ / ____ / ____
Yes <input type="checkbox"/> No <input type="checkbox"/> Lessee met minimum 6 month lease requirement.		Yes <input type="checkbox"/> No <input type="checkbox"/> Lessee provided a 30 day notice.	
<b>White to Housing Office / Green to Vacating Resident</b>			

*Notice: You may be entitled to know what information The University of Texas at Arlington (UT Arlington) collects concerning you. You may review and have UT Arlington correct this information according to procedures set forth in UTS 139. The law is found in sections 552.021, 552.023 and 559.004 of the Texas Government Code.*