



30 Day Notice to Vacate Housing

Name: _____ Address: _____

Rank: _____ Phone: _____ Email address: _____

ACKNOWLEDGEMENT

Please read and initial next to each item.

- _____ (Optional) I give permission for AMH to give my phone number to prospective incoming tenants so that they may call me to arrange to view the unit.
- _____ I understand that I may not be able to reschedule inspections and I am solely responsible for ensuring the unit is vacant, clean and ready to be turned over to AMH on the day of my final inspection.
- _____ I understand that the move out brief and final inspection are mandatory and that the Lessee must be present during the final inspection. AMH will notify my command if I do not keep these appointments.
- _____ I understand my MAC allotment is set up to pay rent charges in arrears and that the current month's balance will be received by AMH on the first of the following month post- move out. Allotments for rent may not be stopped prior to final.
- _____ I understand that any refund due to me will be paid by check and mailed to my forwarding address within 30 days of AMH receipt of the final payment.
- _____ I understand that I have met / not met the lease requirements* to reside with AMH for one full year and that I will be held responsible to pay rent for the full term of the Residential Lease/Rental Agreement or until the unit can be signed to another occupant (whichever comes first).
- _____ By signing this document I am providing AMH with my 30 day required notice. I understand that if the required 30 day notice is not met per the lease, then I will be held responsible for up to 30 days from the day I give notice or until the unit can be assigned to another occupant. Exceptions require proof of short orders.
- _____ I understand that I must be ready to vacate the unit on the date and time that I have been assigned. AMH is not responsible for issues that may prevent me from vacating the unit. I will have the unit empty and ready for final inspection on assigned day and time.

Signature: _____

Date: _____

IMPORTANT DATES

Final Inspection

Date: _____ Time: _____

At Unit

Move-Out Brief

www.auroramilitaryhousing.com/residents/departing/



CHECKLIST

AMH Staff Use

Today's Date: _____

TMO Dates: _____

Clear Base Date: _____

Copy of Orders attached: Yes No
Less than 30 Days: Yes No

Reason for 30 Day Notice (Check One)

- _____ PCS
- _____ Short Orders
- _____ Separating/Retiring Military
Date: _____
- _____ Home Purchase
- _____ Loss of Entitlement
- _____ Off Base rental
- _____ Moving to AMH Unit # _____
- _____ Other: _____

Yes or No

- _____ Deployed Spouses Program
- _____ Upcoming Community Center
Reservation

AMH Representative

Initials: _____

Date: _____