



650 N Beal Parkway  
 Fort Walton Beach, FL 32547  
 Phone: (850) 863-3292 | Fax: (850) 862-3440  
 ms@sundance-rentals.com  
 www.sundance-rentals.com



This is my 30-Day Notice that I will be moving out of the property located at:

DATE: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

**Complete the section that pertains to you:**

1. Are you paying rent by ACH (Automatic Debit)? YES NO (Through Tenant Portal OR Through our Office)
2. Please choose ONE (1) of the following:
  - A. I am **NOT** Breaking my Lease, I understand that I am responsible for paying rent for 30 days from the date of this notice, or the Expiration of the lease, whichever is later: {DATE:} \_\_\_\_\_
  - B. I **AM** breaking my Lease, I understand that I am responsible for paying all rent, keeping the utilities on, maintaining the yard and pool (if applicable), and the upkeep of the unit until it is Re-Rented or thru the end of my Lease which is:  
**DATE OF LEASE EXPIRATION:** \_\_\_\_\_
  - C. I **AM** Breaking my Lease Due to **PCS ORDERS/GOVERNMENT HOUSING ORDERS**
    1. I understand that I am required to provide you with a Written Copy of my PCS Orders.  
**Copy of PCS or Housing Orders Included?** YES NO
    2. I understand that I am required to provide you with either a written copy of official military orders or verification by Commanding Officer that I am moving into Government Housing.
    3. I understand that I am required to keep all utilities on, maintain the yard and pool (if applicable), and the upkeep of the unit per the lease agreement for 30 days after the date of this notice.
    4. I understand that I am responsible for paying rent for 30 days after the date of this notice, which will be:  
 Date: \_\_\_\_\_

My signature below authorizes Sundance Rental Management, Inc. and any of their agents or employees to contact my Commander, First Sergeant, Supervisor, Orderly Room or anyone necessary to verify my Orders.

\*My last day of residency will be: \_\_\_\_\_

**Please initial below:**

\_\_\_\_\_ \*I will turn in my keys and notify Sundance Rental Management upon my move out.

\_\_\_\_\_ \*I will give Sundance Rental Management, Inc. my forwarding address prior to or upon vacating.

\_\_\_\_\_ \*I understand it may take 15 to 30 days, after my Final Inspection, to be notified about my Security Deposit.

**Please circle ONE of the following showing instructions (re-rent ONLY):**

1. I will make the unit available for showing \_\_\_\_\_ (minimum 2) days a week Monday-Friday and will schedule a time during regular business hours with my property manager to show to prospective renters.

**OR**

2. I will provide my property manager with a key so that he or she can show the property anytime, with a one-hour notice to tenants, Monday through Friday 8am to 5pm. **Tenants Initials** \_\_\_\_\_ **Phone** \_\_\_\_\_

**\*\* NOTE: If any pets are present tenant is required to be home during showing;**

REASON FOR VACATING: \_\_\_\_\_

**\*\*\*\*This form is only fully executed once ALL financially responsible tenants have signed and submitted\*\*\*\***

\_\_\_\_\_  
 Tenant Signature

\_\_\_\_\_  
 Tenant Signature

\_\_\_\_\_  
 Tenant Signature

\_\_\_\_\_  
 Tenant Signature

Property Manager Initials \_\_\_\_\_

**TENANT RECEIVED SIGN TO PUT IN YARD**

