

BRUCE A. BLAKEMAN
NASSAU COUNTY EXECUTIVE



KENNETHA A. PETTUS
DIRECTOR OF HOUSING

COUNTY OF NASSAU
OFFICE OF HOUSING
40 MAIN STREET – FIRST FLOOR – SUITE C
HEMPSTEAD, NEW YORK 11550
(516) 572-1900
FAX (516) 572-2790

MUTUAL TERMINATION AGREEMENT

NOTE: THIS FORM MUST BE SUBMITTED 30 DAYS PRIOR TO EFFECTIVE MOVE-IN DATE

I, _____ (name of Head of Household), hereby give notice to vacate the residence located at:

_____.

I will return all keys to the Landlord/Management and all of my personal belongings and furniture will be out of the unit on _____ (*move-out date*).

My reason for moving from my house/apartment is

_____.

I understand that my request may be delayed or denied if Office of Housing receives written notice from my Landlord of any unresolved lease violations.

Head of Household's Signature

Date

Phone #

=====

Landlord Certification

****MUST BE NOTARIZED****

By signing this notice, I, the Landlord of the above referenced address, certify that this tenant is up to date with his/her share of rent and is in good standing with no lease violations.

Name: _____

Phone: _____

Signature: _____

Date: _____

Office Use Only

Approved

Denied

Reason Denied: _____

Signature:

Housing Specialist Initials:

Date: