

DATE _____ PROPERTY NAME / NUMBER TMG Property Management Services NW
 RESIDENT NAME(S) _____
 also all other Occupants or persons unknown claiming any right or interest in the Premises.
 UNIT NUMBER _____ STREET ADDRESS _____
 CITY _____ STATE _____ ZIP _____

I/We, the undersigned Resident(s), hereby give at least 30 days' notice to vacate the above Premises according to Oregon Law. I/We will be vacating the Premises on the _____ day of _____, _____. I/We understand that if I/we vacate the Premises prior to the end of a full 30-day notice period, I/we will be liable for rent for the entire period.

I/We will deliver possession of said Premises to Owner/Agent on that date. Delivery of possession occurs when we give actual notice to Owner/Agent that we have relinquished any right to occupy the Premises. Actual notice includes returning the keys. It is agreed and understood that after the appropriate notice, the Premises may be shown at reasonable times prior to the expiration of this notice.

Resident recognizes that failure to vacate on the date set forth above may cause Owner/Agent to suffer actual damages because of inability to gain access for maintenance or turn-over work or to allow new residents to move in. These damages may include, but are not limited to: (i) the value of any rent accruing from the expiration or termination of the Rental Agreement until Owner/Agent knows or should know that Resident has relinquished possession of the unit; (ii) loss of rent due to delays in delivering possession to a new resident; (iii) any amounts owed to a new resident because of any delays in Owner/Agent's ability to provide possession; (iv) the costs of Owner/Agent's employee time dealing with the delayed delivery of possession; and (v) costs imposed by contractors and other vendors rescheduling their work. Resident will be responsible for all actual damages incurred by Owner/Agent.

Phone _____ (for permission to show Premises to prospective residents)

Reason you are leaving _____

Forwarding address _____

Resident(s) email address _____

Resident(s) authorizes Owner/Agent to use the above email address to communicate regarding unpaid balances.

Any valid termination notice received from any one Resident may be considered by Owner/Agent a termination notice from all Residents.

X RESIDENT	DATE	X RESIDENT	DATE
X RESIDENT	DATE	X RESIDENT	DATE

Because of the global COVID-19 pandemic, you may be eligible for temporary protection from eviction under Federal law. Learn the steps you should take now: visit www.cfbp.gov/eviction [cfpb.gov] or call a housing counselor at 800-569-4287

CONFIRMATION OF RECEIPT OF 30-DAY NOTICE (OWNER/AGENT USE ONLY)

Please be advised that the **estimated** prorated charges for the month(s) of _____ are as follows:

Rent	\$	_____
Lease break fee (if applicable)	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
_____	\$	_____
TOTAL	\$	_____

The following information should be helpful at the time of move-out:

1. All meters should be read as of the date of move-out.
2. All keys, cables, etc. should be returned to Owner/Agent.
3. If damage other than ordinary wear and tear is found in the unit after move-out, an itemized charge will be sent to Resident.
4. If Resident is attempting to terminate a rental agreement for a specific term without complying with a valid early termination clause, or if Resident's notice fails to comply with Oregon law in any respect, the signature of Owner/Agent does not constitute an acceptance of the termination and does not relieve Resident of all amounts due under the Rental Agreement.

This amount is subject to correction or change as part of the final accounting. Resident will remain liable for all other amounts due under the Rental Agreement.

X _____ DATE _____
OWNER/AGENT



Portland Housing Bureau

Rental Services Office

Director Shannon Callahan

421 SW 6th Avenue, Suite 500 • Portland, OR 97204

PHONE 503-823-1303 • FAX 503-865-3260

portlandoregon.gov/phb/rso

Rental Services Helpdesk Hours

MON, WED, FRI 9–11am and 1–4pm

Rental History Form Required Under Portland City Code Title 30.01.087.F

Within the City of Portland, a landlord is required to provide this completed form to a tenant within 5 business days of receiving a request from a tenant, receiving notice from the tenant of intent to terminate the tenancy, or when a landlord gives notice of intent to terminate a tenancy. This form may be transmitted in digital or paper form.

Tenant Information

Tenant Name: _____

Landlord Information

Landlord Name: _____

Contact Information: _____

Residency Information

Address: _____

Move-in Date: _____ Move-out Date (if known): _____

Landlord Signature: _____

Date: _____





If you believe you have been harassed or discriminated against because of your race, color, national origin, religion, gender, familial status, disability, marital status, source of income, sexual orientation including gender identity, domestic violence, type of occupation, or age over 18 seek legal guidance regarding your rights under Fair Housing law.

For translation or interpretation, please call 503-823-1303
TTY at 503-823-6868 or Oregon Relay Service at 711

503-823-1303: Traducción e interpretación | Chuyển Ngữ hoặc Phiên Dịch | 翻译或传译
Письменный или устный перевод | 翻訳または通訳 | Traducere sau Interpretare
번역 및 통역 | Письмовий або усний переклад | Turjumida ama Fasiraadda
الترجمة التحريرية والشفوية | ການແປພາສາ ຫຼື ການອະທິບາຍ

This requirement is in addition to any other rights and responsibilities set forth in the Oregon Residential Landlord and Tenant Act under Oregon Revised Statute Chapter 90, and Portland Landlord-Tenant Law under Portland City Code Title 30.

The information in this form is for educational purposes only. You should review appropriate state statute, city code, and administrative rule as necessary. If you need legal guidance, or are considering taking legal action, you should contact an attorney.