

NEW YORK NOTICE TO QUIT FOR NON-COMPLIANCE

Date: _____ Property/Landlord's Name: _____

Contact Name: _____ Phone #: _____

Landlord Contact Email Address: _____

Tenant's Full Name: _____

Tenant's Address: _____ Apt: _____

City: _____ State: _____ Zip Code: _____

Violation of Lease/Rules and Regulations - The violation is described by the landlord as _____. In accordance with RPL §§ 753(4) if the above described violation is not cured within **ten (10) days**, the tenant must move-out by the tenth (10th) day on _____, 20_____.

Landlord Signature _____

CERTIFICATE OF SERVICE

Served Date: _____ Time: _____

Type of Service

- Delivered a copy to him / her personally: Signature _____

- Left a copy with a competent household member over 14 years of age residing therein - indicate name & relationship:

Household Member's Signature _____

- Delivered through Certified Mail.

- Left on the property in a conspicuous place (such as under or on the front door).