**RHODE ISLAND NOTICE TO QUIT**

To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*If to the Tenant, this notice is directed towards all residents (tenants and subtenants) in possession and all other in possession*

The premises herein referred to is located in the City of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State of Rhode Island, Zip Code \_\_\_\_\_\_\_\_\_\_ designated by the number and street as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Apt.\_\_\_\_\_\_.

In accordance with your lease agreement signed on the \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_ and the laws in the State of Rhode Island after service on you of this notice, you are hereby required:

**(*Check Appropriate Box*)**

☐ - **NONPAYMENT** - Within ten (10) days you shall pay to the undersigned or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ an authorized agent, the rent of the premises hereinafter described, of which you now hold possession amounting to the sum of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dollars ($\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) enumerated as follows:

**$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Due from \_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_ To \_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_**

or quit and deliver up the possession of the premises.

☐ - **NONCOMPLIANCE** (1st OFFENSE) - Within twenty (20) days remedy the violation described as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. This is in non-compliance with your lease agreement. You shall notify the landlord by the end of the notice period that the violation has been cured or quit and deliver the possession of the premises at the end of twenty (20) days.

☐ - **NONCOMPLIANCE** (2nd OFFENSE) - Within twenty (20) days to remove yourself from the premises due to the same noncompliance occurring in the last six (6) months described as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. This act hereby terminates your lease and you shall remove yourself, along with your possessions, within twenty (20) days from receiving this notice.

☐ - **MONTH TO MONTH TENANCY** - I am your **Landlord** and this is the Tenant’s official notice that their lease shall be terminated on the \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_. Termination must be at least thirty (30) days from the next payment date.

☐ - **MONTH TO MONTH TENANCY** - I am your **Tenant** and this is the Landlord’s official notice that their lease shall be terminated on the \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_. Termination must be at least thirty (30) days from the next payment date.

**YOU ARE FURTHER NOTIFIED THAT,** the owner/landlord does hereby elect to declare that forfeiture of your lease or rental agreement under which you hold possession of the above described premises if you fail to perform or otherwise comply, will institute legal proceedings to recover rent and possession of said premises which would result in a judgment against you including costs and necessary disbursements together with possible statutory damages as allowed by law for such unlawful detention.

Landlord/Agent Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CERTIFICATE OF SERVICE**

I certify that on the \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_ I served this notice to

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ by

☐ - delivering it personally to the person in possession.

☐ - delivering it on the premises to a member of his/her family or household or an employee of suitable age and discretion with a request that it be delivered to the person in possession.

☐ - first-class mail addressed to the person in possession.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_