

**Boston University** Real Estate  
846 Commonwealth Ave  
Boston, Massachusetts 02215  
T: (617) 353-4101 F: (617) 353-3737



VACATE NOTICE

TRUSTEES OF BOSTON UNIVERSITY

Please accept this as my request to quit apartment # \_\_\_\_\_ at \_\_\_\_\_  
APT NUMBER BUILDING ADDRESS

as of \_\_\_\_\_.  
VACATE DATE

Any monies (security deposit and/or key deposit refund) may be mailed to me at the following address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IMPORTANT:** If this vacate notice is approved, then failure to vacate on the above date will result in a \$100.00 charge for every day the tenant remains in residence.

I do \_\_\_\_ do not \_\_\_\_ have a Tenant Parking Permit issued by the Real Estate Office.

If you do have a Tenant Parking Permit, parking space number? \_\_\_\_\_

Please let us know your reason for vacating the apartment?

\_\_\_\_\_

Name (Please Print) \_\_\_\_\_

Co-Tenant Name (Please Print) \_\_\_\_\_

Signature \_\_\_\_\_

Signature \_\_\_\_\_

BU I.D. Number \_\_\_\_\_

BU I.D. Number \_\_\_\_\_

Daytime Phone \_\_\_\_\_

Daytime Phone \_\_\_\_\_

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**FOR OFFICE USE ONLY**

Rental Manager Approval \_\_\_\_\_

Date \_\_\_\_\_

Comments: \_\_\_\_\_