State of Illinois Rev. 13413B3

## **NOTICE OF TERMINATION**

| , 20   |   |
|--|---|
| To:  |   |
| Rental Property:   |   |
| YOU ARE HEREBY NOTIFIED THAT, under the terms of the lease 20 (the "Lease") for the rent and use of the premises listed above  |   |
| YOU ARE CURRENTLY IN VIOLATION (☐ of SectionFOLLOWS:   | ) OF THE LEASE AS                         |
|  | ·   |
| The violation is: (Check one)  |   |
| ☐ Curable. Demand is made that you remedy the violation on the tenancy will be terminated and you must vacate the premise you correct the violation or vacate the premises, legal action may be  | ses. You are further notified that unless |
| ☐ Incurable. The tenancy is hereby terminated and you must very possession of the same to me on or before  | at: AM/PM. You are                        |
| THIS IS A: (Check one)   |   |
| ☐ 10 DAY NOTICE. (the minimum required by law) ☐ DAY NOTICE. (number of days stated in original lease ag   | greement)                                 |
| THIS NOTICE IS PROVIDED TO YOU IN ACCORDANCE WITH T<br>NOTHING IN THIS NOTICE IS INTENDED OR SHALL BE CONST<br>LANDLORD OF ANY RIGHTS OR REMEDIES THE LANDLORD IN<br>UNDER STATE OR FEDERAL LAW. | RUED AS A WAIVER BY THE                   |
|  |   |
| Signature  | Date                                      |
| Landlord Info: Name: Address: Phone Number:  |   |

## **AFFIDAVIT OF SERVICE**

Eviction Notice (Rev. 13413B3)

| I, the undersigned, being at least 18 years of age, declare under penalty of perjury under the laws of the State of Illinois, that on, 20, I served a true copy of the attached Notice of Termination in the following method: |   |  |
|--|---|--|
| □ Personal delivery to   | _ at the following address:                         |  |
|  | , a person at least 13 years of age and residing at |  |
| ☐ Registered mail, return receipt requested to   | at the following address:                           |  |
| ☐ Certified mail, return receipt requested to  | at the following address:                           |  |
| ☐ Posted delivery at the following address:  | <del>-</del>  |  |
| Signed by:   |   |  |
| Print Name:  |   |  |
| Date:  |   |  |
| ACKNOWLEDGEME  | NT OF NOTARY PUBLIC                                 |  |
| State of Illinois )  |   |  |
| County of  |   |  |

| person(s) described in and who executed the within instrument, and ack same as their voluntary act and deed, for the uses and purposes therein m |      |
|--|------|
| Witness my hand and official seal hereto affixed on this day of  | , 20 |
| Signature  |      |
| Notary Public  |      |
| My Commission Expires:   |      |