

Oxford Houses of Oregon

"Opening Doors to a New Way of Life"



**PO Box 66699 Portland, OR ♦ 97290-6699
(503) 247-0777**

Termination of Tenancy

DATE: _____ **TENANT(S)** _____ **et al.**

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

Pursuant to Oregon Landlord/Tenant law, this is your **60 DAY** notice of the landlord's intent to terminate your tenancy. It is not necessary to show you have done anything wrong or that you have violated your rental agreement.

This notice has been served personally at _____ am/pm on _____ (date).
Your rental agreement will terminate at midnight _____ (date).

This notice has been served by first class mail and the effective date is extended by four days including the date mailed. Your rental agreement will terminate at midnight _____ (date: 33 days from date mailed).

CONTACT PERSON: _____.

ADDRESS: _____.

TELEPHONE: _____
_____.

Housing, fellowship, self-reliance and self-respect for recovering individuals