

FORM 1

NOTICE FROM LANDLORD TO TENANT--TERMINATION  
FOR FAILURE TO PAY RENT

INSTRUCTIONS

This notice may be delivered by mail or by delivering a copy to the dwelling unit, or, if the Tenant is absent from the dwelling unit, by leaving a copy thereof at the dwelling unit.

If the Tenant fails to pay rent when due and the default continues for three (3) days (excluding Saturday, Sunday, and legal holidays) after delivery of written demand by the Landlord for payment of the rent or possession of the premises, the Landlord may terminate the rental agreement. This written demand is a prerequisite to an action to evict the Tenant or recover past due rent. Your written rental agreement may have allowed for a longer period than three days and should be reviewed.

SOURCE: Section 83.56(3) and (4), Florida Statutes (2007).

FORM NOTES ARE FOR INFORMATIONAL PURPOSES ONLY AND MAY NOT COMPLETELY DESCRIBE REQUIREMENTS OF FLORIDA LAW. YOU SHOULD CONSULT AN ATTORNEY AS NEEDED.

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To:	
	Tenant's Name
	Address
	City, State, Zip Code
From:	
Date:	

You are hereby notified that you are indebted to me in the sum of \$ \_\_\_\_\_ [insert amount owed by Tenant] for the rent and use of the premises located at \_\_\_\_\_, Florida [insert address of premises, including county], now occupied by you and that I demand payment of the rent or possession of the premises within three days (excluding Saturday, Sunday and legal holidays) from the date of delivery of this notice to-wit: on or before the \_\_\_ day of \_\_\_\_\_, 20\_\_\_ [insert the date which is three days from the delivery of this notice, excluding the date of delivery, Saturday, Sunday and legal holidays].

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name of Landlord/Property Manager  
[circle one]

\_\_\_\_\_  
Address [street address where Tenant can deliver rent]

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Phone Number

Hand Delivered On

Posted On

Approved for use under rule 10-2.1(a) of  
the Rules Regulating The Florida Bar

The Florida Bar 2010

This form was completed  
with the assistance of:

Name:

Address:

Telephone Number: