



HOUSING AUTHORITY OF THE  
CITY AND COUNTY OF SAN FRANCISCO

## Notice of Intent to Move

Dear Landlord/Property Manager,

It is my intention to move from your unit located at:

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Address City State Zip

I will leave the unit on: \_\_\_\_\_  
Date

You can contact me at: \_\_\_\_\_  
Phone Number Email

I am providing you with at least 30 day written notice.

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Tenant Name Signature Date

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Landlord/Property Manager Name Signature Date

### **Housing Authority of the City and County of San Francisco Policy**

The family is responsible for any Housing Quality Standards (HQS) break by the family cause by failure to pay and maintain tenant-provided utilities, appliances, or damages to the dwelling unit or premises beyond normal wear and tear cause by any member of the household or guest.