



Sonoma County Community Development Commission
 1440 Guerneville Rd Santa Rosa CA 95403
 (707) 565-7500 (707) 565-7583 – fax

OWNERS PERMISSION TO VACATE

I agree to allow _____ to
 (Tenant Name)
 vacate the unit located at _____
 (Street Address)
 on _____, 20_____. I further agree that the Sonoma County
 (Month) (Date) (Year)

Housing Authority is not liable for any rent after the above date, and if any excess rent has been paid to me, it will promptly be returned to the Housing Authority.

Tenant:

 (Print Name)

Landlord:

 (Print Name)

Date: _____

Date: _____

White Copy to Sonoma County Housing Authority
 Yellow Copy to Tenant
 Pink Copy to Landlord