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MARKET RATE LEASE RENEWAL

TO: _____

DATE: _____ APT. #: _____

TEL.#: _____

DEVELOPMENT NAME: _____

APPLICANT/RESIDENT: _____

FROM: _____

TEL.#: _____

FAX #: _____

Dear Resident:

Thank you for making your home with us this past year. Our records indicate that your current lease will expire on _____. Your new rent amount will be \$ _____. We would like to know if you plan to renew your lease. Please return this form to our office within 14 days.

We look forward to serving you again in the coming year. Thank you.

Sincerely,

Property Management

Do you intend to stay in your apartment for another lease term?

- Yes, I/We intend to renew my/our lease.
- No, I/We intend to move on my/our lease termination date.

Forwarding Address: _____

Original - Resident
Copy - Resident File

OFFICE USE ONLY:



We encourage and support the nation's affirmative housing program in which there are no barriers to obtaining housing because of race, color, religion, sex, national origin, handicap or familial status.

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04/01/04 HPI 412