

DELAWARE 5-DAY NOTICE TO QUIT | NON-PAYMENT

Date: _____ (mm/dd/yyyy)

To: _____ (Tenant Name(s))

Rental (Premises) Street Address: _____

Unit #: _____ City: _____ State: Delaware

You are notified that you owe rent in the amount of \$_____. This amount does not include any late fees that you may also owe. You may not be evicted for non-payment of late fees.

If you do not pay this rent by the date stated below, which must be at least five (5) days after the date and time you receive this notice, your tenancy will be terminated, and you will be required to move.

Date and time by which rent must be paid:

Date: _____ (mm/dd/yyyy) Time: _____ (AM | PM)

If you pay your rent in full before the date and time above, you do not have to move.

**If you do NOT pay your rent or move by the date and time above,
a lawsuit may be filed to evict you.**

Landlord / Agent Signature: _____ Printed Name: _____

----- CERTIFICATE OF SERVICE -----

I certify that on _____ (mm/dd/yyyy) I served this notice to
_____ (Tenant / Recipient name) by:

- Delivering it personally to the person in possession of the Premises.
- Delivering it to the Premises to a member of the Tenant's family or household or an employee of suitable age and discretion with a request that it be delivered to the person in possession of the Premises.
- Certified first-class mail addressed to the person in possession of the Premises.

Landlord / Agent Signature: _____