

WISCONSIN 5-DAY NOTICE TO QUIT | CRIMINAL ACTIVITY

Date: _____ (mm/dd/yyyy)

To: _____ (Tenant Name(s))

Rental (Premises) Street Address: _____

Unit #: _____ City: _____ State: Wisconsin

You, a member of the household, or a guest on the premises have violated the law by engaging in criminal activity pursuant to § 704.17(3m) involving drug-related criminal activity or criminal activity that threatened the health and safety of, or right to peaceful enjoyment of the premises by, another tenant, a person residing in the immediate vicinity of the premises, the landlord, or the landlord's agent as follows:

The criminal activity was noted on _____ (mm/dd/yyyy) at _____ AM | PM involving the following person(s):

<u>Name</u>	<u>Description</u>
_____	_____
_____	_____
_____	_____
_____	_____

Pursuant to Wisconsin law, you are hereby notified that your tenancy is terminated on _____ (mm/dd/yyyy) at _____ AM | PM (which is not less than five (5) days from the date this notice is served on you). You must move from the premises no later than this date and time. If you have not moved by the date and time indicated on this notice, a lawsuit may be filed to evict you.

Under Wisconsin law, you have the right to contest the allegations before a court commissioner or judge. You also have the right to seek the assistance of legal counsel, a volunteer legal clinic, or a tenant resource center.

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: _____