

WISCONSIN FOURTEEN (14) DAY NOTICE TO QUIT

TO TENANT(S): _____
AND ANY AND ALL OTHER OCCUPANTS IN POSSESSION OF THE PREMISES LOCATED
AT: _____
_____ City: _____, State: Wisconsin, Zip Code: _____

PLEASE TAKE NOTICE that you are not in compliance with the terms of your lease agreement for failure to pay rent by the due date more than once during a 12-month period. You have fourteen (14) days to vacate the premises.

Total Amount of Rent Due: \$ _____

Where the Amount Due Should be Paid:

You and all other occupants must move out of the premises by: _____

If you and all other occupants fail to move out and deliver possession of the premises by the termination date specified above, legal action may be taken to evict you from the premises and to recover all unpaid rent, costs for damages to the premises, if any, and any other remedies available under Wisconsin law.

THIS NOTICE IS IN ACCORDANCE WITH WI Stat § 704.17(2)(a).

Dated this _____ day of _____, 20____

(Signature of Landlord)

(Landlord's Printed Name)

(Landlord's Address, City, State, Zip Code)

(Landlord's Telephone Number)

**DECLARATION OF SERVICE OF
NOTICE TO QUIT**

I, _____, declare:

1. I am now, and at all times mentioned herein, a citizen of the United States, resident of the State of _____, over the age of eighteen years. I make this declaration based on my own personal knowledge. I am competent to testify to the matters herein.

2. On _____, 20____, at approximately _____ am/pm, I served a Notice to Quit to the Premises located at: _____, _____ in the County of _____, Wisconsin by:

- a) personally handing a true and correct copy to _____, Tenant under the Lease, (hereinafter the "Tenant"); **OR**
- b) personally handing a true and correct copy to _____, a person of suitable age and discretion or a family member (at least 14 years of age), who was then resident therein, accepting same on behalf of the Tenant, and mailing a copy addressed to the Tenant; **OR**
- c) posting a copy of the Notice to Quit in a conspicuous location at the premises, there being no competent persons or family members located on the premises and mailing a copy addressed to the Tenant.

I declare under penalty of perjury of the laws of the State of Wisconsin that the foregoing is true and correct.

DATED this _____ day of _____, 20____, in the city of _____, Wisconsin.

_____, Declarant

(PRINT NAME)