

**( ) RESIDENT NOTIFICATION OF MOVE-OUT**  
**( ) AND REQUEST TO TRANSFER TO ALTERNATE CADA APARTMENT**

**TO: Capitol Area Development Authority (Owner/Agent) 1522 14<sup>th</sup> St Sac, CA 95814**

**You are hereby given notice that \_\_\_\_\_**  
(Name of each resident currently residing in the apartment, if all are moving)

**Intend(s) to terminate the tenancy and to move from the premises located at:**

\_\_\_\_\_, Unit # \_\_\_\_\_ Sacramento, CA 95814  
(Street Address)

as of \_\_\_\_\_ (date).

**Please check one: ( ) "One Resident Only" is moving; ( ) "All Residents are moving."**

**All residents who are moving must provide CADA advance written notice.**

**( ) I/We also intend to vacate my/our parking space located at: \_\_\_\_\_.**

**It is understood as follows:**

- a. That a Thirty Day Notice of Intent to Vacate is required by Section 1946 of California Civil Code for month-to-month tenancies;
- b. For Residents on a fixed-term lease, a Thirty Day Notice of Intent to Vacate does not relinquish Resident from any obligation of the lease, including payment to the end of the lease term;
- c. Resident's possession of the unit remains in effect until all belongings are removed and all keys returned; and
- d. Except as provided by law, rent is due and payable up to and including the final date of possession, or thirty (30) days after service of this notice to Owner/Agent, whichever is later.
- e. Resident cannot use the security deposit as last month's rent. Rent is payable through the termination of the tenancy.
- f. If Resident intends to transfer to another CADA apartment that the rental application will be updated, a new deposit shall be paid, and a Transfer Request Addendum will be signed.
- g. Transfer requests are approved upon verification of on-time rental payments and no lease violations.

**REASON FOR MOVING: \_\_\_\_\_**

**SIGNATURE/S:**

My signature below acknowledges my Intent to Vacate my apartment on the date specified, and to have CADA enter the apartment on that date to conduct a move-out inspection. I agree that any remaining security deposit may be split equally among all resident/s on the rental agreement whose signatures appear below, or to the one resident listed as authorized to receive any remaining security deposit balance. Resident(s) signature constitutes approval for the deposit to be sent to specified resident rather than split equally among all. **If no forwarding address is provided, any remaining security deposit will be sent to the apartment address for forwarding by the post office.**

Signature of Resident #1: \_\_\_\_\_ Date: \_\_\_\_\_

Forwarding Address/Ph. #: \_\_\_\_\_

Signature of Resident #2: \_\_\_\_\_ Date: \_\_\_\_\_

Forwarding Address/Ph. #: \_\_\_\_\_

**PLEASE SEND THE SECURITY DEPOSIT TO THE FOLLOWING RESIDENT:**

Name/Address: \_\_\_\_\_

**Resident Satisfaction Survey  
"at Move-out" (Pg. 1)**

**NAME:** \_\_\_\_\_ **PHONE #** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **MOVE-OUT DATE:** \_\_\_\_\_

We are sorry to learn that you are leaving. While we live in a mobile society and there may be many reasons for such a move, we would like to know if there has been anything about your residency with CADA that has prompted your decision. We would appreciate your taking a moment to respond to the questions listed below and returning your answers to the CADA office. Your honest answers, and any suggestions for improvements, will assist us to better serve our valued residents. *(Please be sure to fill out both pages. Thank you.)*

**1. How long have you rented from CADA (include all apartments you've lived in):**

\_\_\_\_\_

**2. How did you originally hear about CADA?**

\_\_\_\_\_

**3. Please tell us the primary reason you originally rented from CADA:**

\_\_\_\_\_ ) \_\_\_\_\_

**4. Please tell us the primary reason why you are moving:**

Moving to a smaller / larger apartment	_____	Moving to a newer apartment	_____
Moving out of the area	_____	Purchasing own home	_____
Dissatisfied with Management	_____	Moving into a house/condo	_____
Personal (illness, etc.)	_____	Financial	_____
Change in household size	_____	Other: _____	_____

**5. Please tell us if there's anything we might have done to encourage you to continue as a resident in your CADA apartment home:**

\_\_\_\_\_

**6. Have you been pleased with the general appearance of the buildings, grounds, walks, and other facilities and the manner in which they have maintained:**

\_\_\_\_\_

**7. Have you been treated courteously and fairly by your Resident Services Representative (on-site manager) and other CADA staff:**

\_\_\_\_\_

**8. Have CADA staff quickly and efficiently resolved any concerns you've had regarding maintenance, issues with neighbors, etc.):**

\_\_\_\_\_

~ Survey continued on Back. Thank you for taking the time to tell us how we're doing. ~

**RESIDENT SATISFACTION SURVEY- "at Move-Out"(PAGE 2)**

**9. Please tell us what you liked BEST about your apartment:**

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**10. Please tell us what you liked LEAST about your apartment:**

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**11. Regarding what you liked least about your apartment, what might correct the issue?**

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**12. Please tell us what you liked BEST about the building in which you lived:**

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**13. Please tell us what you liked LEAST about the building in which you lived:**

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**14. Regarding what you liked least about your building, what might correct the issue?**

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**15. What do you like BEST about living in the Capitol Park neighborhood / downtown Sacramento:**

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**16. What do you like LEAST about living in the Capitol Park neighborhood / downtown Sacramento:**

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**17. Regarding what you liked least about living downtown, what might correct the issue?**

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**18. Please rate our operations, on a scale of one to five, with five being the best:**

Clean and well-kept properties:	(Disagree)	1	2	3	4	5	(Agree)
Prompt problem resolution:	(Disagree)	1	2	3	4	5	(Agree)
Attentive and professional staff:	(Disagree)	1	2	3	4	5	(Agree)
Efficient follow-up to concerns:	(Disagree)	1	2	3	4	5	(Agree)
Prompt and professional response to requests for repairs:	(Disagree)	1	2	3	4	5	(Agree)

**19. OVERALL, how well did we meet our goals of being a responsive and professional Landlord?**

**(NOT VERY WELL) 1 2 3 4 5 (VERY WELL)**

**20. Will you refer your friends to CADA?**

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*Thank you for taking the time to tell us about your experience as a CADA resident,  
and for choosing to make your home with us.*