[DATE]

**NOTICE OF NONCOMPLIANCE**

**OTHER THAN FAILURE TO PAY RENT**

**[INSERT ALL NAMED TENANT(S)]**

**And/or Tenant(s) in Possession**

**[INSERT PREMISES STREET ADDRESS]**

**[INSERT PREMISES CITY], Florida [INSERT ZIP CODE]**

**RE: SEVEN-DAY NOTICE OF NONCOMPLIANCE**

Dear [INSERT ALL NAMED TENANT(S)] and/or Tenant(s) in Possession:

Your tenancy for the premises at [INSERT PREMISES STREET ADDRESS], in [INSERT PREMISES CITY], Florida[INSERT ZIP CODE] (“Premises”) is governed by the terms of your lease agreement with [NAME OF LANDLORD] (“Landlord”). You are hereby notified that you are in violation of your lease agreement, specifically [INSERT RELEVANT SECTION OF LEASE], in that you have failed to [PROVIDE SUMMARY OF FAILURE TO CONFORM TO LEASE, SUCH AS FAILURE TO MAINTAIN THE PREMISES TO THE EXTENT CERTAIN MAINTENANCE RESPONSIBILITIES ARE AN OBLIGATION OF THE TENANTS UNDER THE TERMS OF THE LEASE AGREEMENT].

In compliance with section 83.56(2)(b) of the Florida Statutes, demand is hereby made and given to you, in writing, that you remedy the noncompliance within seven days of receipt of this notice or your lease shall be deemed terminated, and you shall vacate the premises upon such termination.

If this same conduct or conduct of a similar nature is repeated within 12 months, your tenancy is subject to termination without further warning and without you being given an opportunity to cure the noncompliance.

**GOVERN YOURSELF ACCORDINGLY.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**[INSERT LANDLORD/AGENT NAME]**

**[INSERT LANDLORD/AGENT ADDRESS]**

**[INSERT LANDLORD/AGENT PHONE NUMBER]**

Certificate of Service

I HEREBY CERTIFY that a copy of this Notice has been furnished to the above-named tenant(s) on [INSERT DATE] in the following manner:

By mail regular/certified to said tenant(s).

By personally delivering the same to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By posting at the above-described premises in the absence of the said tenant(s).

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_