**NOTICE OF DELINQUENT RENT**

**NOTE: This is not a 5-day *Quit or Pay Notice* as defined under Wisconsin statutes or a notice intended to terminate your tenancy. This Notice is being given to you to confirm the amount of your rent delinquency for purposes of qualifying for governmental Rent Assistance. An application for such assistance may be submitted by you or by your landlord on your behalf to an appropriate agency.**

 **Talk to Us. We want to work with you!**

*Evictions will impact your ability to rent in the future. Please call and let us know your situation.*

**To:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (name)

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (name)

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (street address)

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (city, state)

As of the date of this Notice you owe delinquent rent and late fees and other charges (if noted) as a tenant of the above premises. Your established monthly rent is $\_\_\_\_\_\_\_\_\_\_\_. The total amount due is stated as follows:

$ \_\_\_\_\_\_\_\_\_\_\_\_ Base rent arrears through the month of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 2021

 \_\_\_\_\_\_\_\_\_\_\_\_ Late fees through the month of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 2021

 \_\_\_\_\_\_\_\_\_\_\_\_ Other charges (e.g., water & sewer bills or other unpaid tenant obligations)

 **$**\_\_\_\_\_\_\_\_\_\_\_\_ **TOTAL**

**Dated:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Landlord / Landlord’s Agent:**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (address)

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Phone and/or email)