

## NOTICE OF TERMINATION FOR NON-PAYMENT OF RENT

<b>Instructions ▼</b>
<p>This <i>Notice</i> is commonly called a "5-Day Notice." However, the lease or local law may require a longer notice period (see <b>2b</b> below).</p>
<p>Identify the tenants and mailing address.</p>

Date: \_\_\_\_\_

To:

\_\_\_\_\_  
*Tenant Names*

And any unknown occupants.

\_\_\_\_\_  
*Street Address*

\_\_\_\_\_  
*Unit*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*State*

\_\_\_\_\_  
*ZIP*

In **1**, enter the total amount of rent currently due.

**1.** You owe \$ \_\_\_\_\_ in rent for the property located at:

\_\_\_\_\_  
*Street Address*

\_\_\_\_\_  
*Unit*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*State*

\_\_\_\_\_  
*ZIP*

In **2**, check **2a** unless the law or lease requires you to give the tenant more time to pay. If you check **2b**, enter the number of days the tenant has to pay.

**2.** You must pay the full amount you owe within:

a.  5 days, OR

b.  \_\_\_\_\_ days (*must be more than 5 days*)

after the date this *Notice* is served. If you do not, your lease will be terminated and your landlord may file an eviction case against you and unknown occupants.

**NOTE:**

- For how to determine when the 5 days end, see *How to File & Present an Eviction Case*.
- Only FULL PAYMENT of the rent demanded in this *Notice* will waive the landlord's right to terminate the lease under this *Notice* unless the landlord agrees in writing to continue the lease in exchange for receiving partial payment.

After you finish this form, sign and print your name.

\_\_\_\_\_  
*Landlord or Agent Signature*

\_\_\_\_\_  
*Street Address*

Enter your complete current address, telephone number, and email address, if you have one.

\_\_\_\_\_  
*Print Your Name*

\_\_\_\_\_  
*City, State, ZIP*

\_\_\_\_\_  
*Telephone*

\_\_\_\_\_  
*Email*

**NOTE:**

After this *Notice* is served, the person who serves this *Notice* should complete the *Affidavit of Service of a Demand or Notice* available at [illinoiscourts.gov/Forms/approved/](http://illinoiscourts.gov/Forms/approved/).

### AFFIDAVIT OF SERVICE OF A DEMAND OR NOTICE

**Instructions** ▼

In 1, enter your name and the date you served the occupants.

In 2, check the box that states how you delivered the *Demand* or *Notice*. Do not use the method in **d** unless the property is vacant.

The person who served the *Notice* or *Demand* should complete this *Affidavit*. Attach the completed *Affidavit* to the *Eviction Complaint* and bring a copy to court on the date of the first hearing.

Under the Code of Civil Procedure, [735 ILCS 5/1-109](#), making a statement on this form that you know to be false is perjury, a Class 3 Felony.

Enter your current address and telephone number.

If you are completing this form on a computer, sign your name by typing it. If you are completing it by hand, sign and print your name.

Enter your complete address, telephone number, and email address, if you have one.

1. I, \_\_\_\_\_, served the attached *Demand* or *Notice*  
*Name of person who served the demand or notice*  
on \_\_\_\_\_ .  
*Date*

2. I served the *Demand* or *Notice* by:

- a.  Delivering a copy to a tenant or occupant named on the *Demand* or *Notice*.  
This person's name is \_\_\_\_\_ .  
*Name*
- b.  Leaving a copy with a person who is at least 13 years old and is an occupant who is not named in the *Demand* or *Notice*.  
This person's name is \_\_\_\_\_ .  
*Name (if known)*
- c.  Sending a copy by certified/registered mail, with return receipt from the addressee (*USPS green card is attached*).
- d.  Posting a copy on the property because no one is in actual possession of the property.

**I certify that everything in the *Affidavit of Service of a Demand or Notice* is true and correct. I understand that making a false statement on this form is perjury and has penalties provided by law under [735 ILCS 5/1-109](#).**

\_\_\_\_\_  
*/s/*  
*Your Signature*

\_\_\_\_\_  
*Street Address*

\_\_\_\_\_  
*Print Your Name*

\_\_\_\_\_  
*City, State, ZIP*

\_\_\_\_\_  
*Telephone*

\_\_\_\_\_  
*Email*