

NOTICE TO CURE OR QUIT

Date: [Date of Notice]

To Tenant(s): [Tenant Names]

Rental Address: [Full Property Address]

RE: VIOLATION OF LEASE AGREEMENT - EXPIRED RENTERS INSURANCE

Dear [Tenant Names],

This letter serves as formal notice that you are in violation of your Lease Agreement dated [Lease Start Date] regarding the property located at the address listed above.

According to Section [Section Number] of your Lease Agreement, you are required to maintain a valid renters insurance policy throughout the entire duration of your tenancy. Our records indicate that your insurance coverage has expired or has been cancelled, effective [Date of Expiration/Cancellation].

TO CURE THIS VIOLATION:

You must provide the Landlord/Management with a Certificate of Insurance showing a valid, active policy that meets the requirements of your lease no later than [Number of Days, e.g., 3] days from the receipt of this notice.

FAILURE TO COMPLY:

If you fail to provide proof of insurance by the date specified above, your lease will be terminated, and you must vacate the premises. Failure to cure this violation or move out may result in legal action, including eviction proceedings.

Please submit the required documentation to: [Email Address or Office Address].

Sincerely,

[Landlord/Manager Name]

[Phone Number]

[Email Address]

Proof of Service: I, the undersigned, certify that I served this notice on [Date] by [Method: e.g., Personal Delivery / Certified Mail / Posting on Door].