175 W JACKSON BLVD, SUITE 350 – CHICAGO, IL – 60604 –312-237-4272 FAX

ATTN:

RENEWAL MOVE TO RENEW IN PLACE REQUEST

RENEWAL MONTH: _____

Tenant name: _____ Client #_____ Vendor_____

Address: _____ Landlord:_____

City/Zip: _____

Dear participating landlord and tenant:

If both tenant and present landlord decide to renew the lease for another lease term, please complete and return this form.

_____ _____

Print landlord Name and Print tenant name

Agree to renew the lease for the above listed unit.

_____ _____

Signature of Landlord Date

_____ _____

Signature of Tenant Date

Notes: Tenant, by signing this form you are waiving your right to submit the documents for moving that you have. Payments will not resume until this form is signed by the tenant and landlord, returned and the renewal process completed.