DEMAND FOR COMPLIANCE OR RIGHT TO POSSESSION NOTICE

FOR PROPERTY LOCATED IN _____ COUNTY

To: _____ (Tenant)

I hereby demand that, within the following selected time frame:

- ❑ Residential Agreement: 10 days from the date that this notice is served
- ❑ CARES Act Property: 30 days from the date that this notice is served
- ❑ Exempt Residential Agreement: five days from the date this notice is served
- ❑ Employer-provided Housing Agreement: three days from the date this notice is served
- ❑ Non-Residential Agreement: three days from the date this notice is served

You either comply with the covenant stated below or deliver to the Landlord the possession of the premises identified below:

Street Address_____ City _____ County _____		
Subdivision	Lot	Block

The covenant/condition with which you are to comply is (check one or both, as applicable)

- ❑ The payment to the landlord in the sum of $_____ being past due rent and owed to the landlord from _____, 20 _____, to _____20_____.
- ❑ Other covenant of the lease that is being violated is: _____
  _____
  _____
- ❑ You have engaged in conduct that is disturbing others or causing a nuisance, which conduct interferes with the quiet enjoyment of the landlord or other tenants or occupants or are negligently damaging the property. You have ten (10) days from receipt of this demand to cease this conduct or to vacate. The conduct is:_____
  _____
  _____
  _____

The covenant/condition checked above constitutes default under the terms of the Lease, and this default entitles the Landlord to possession of the premises. The rental for said premises is $_____ per _____.

Dated: _____

_____
Landlord/Property Manager

_____
Agent or Attorney

CERTIFICATE OF SERVICE

I hereby certify that I served this Demand on in _____ (County), Colorado by my selection below:

- ❑ By leaving a true copy with _____ (Full Name of Person) who is the Tenant,
- ❑ other person occupying such premises, or
- ❑ a member of the Tenant's family above the age of 15 years and residing on or in charge of the premises _____ (Full Name of Person)

First Attempt_____(date)

Second Attempt_____(date)

- ❑ After failing to achieve personal service on the above dates, by then posting in a conspicuous place on the premises at_____ on _____(date). **You may not choose this option unless an attempt at personal service has been made on two (2) separate days.**

_____

Signature Date