

Tenant(s): _____
Tenant(s): _____ et al (and all others)
Address: _____ Unit: _____
City: _____ OREGON Zip: _____

DATE OF SERVICE: _____

TIME SERVED PERSONALLY TO EACH INDIVIDUAL NAMED ABOVE: _____
(If left blank, notice was personally served prior to 11:59 p.m. on Date of Service)

TIME POSTED & MAILED: _____
(If left blank, notice was posted and mailed prior to 11:59 p.m. on Date of Service)

MAILED: _____
(If left blank, notice was mailed prior to 11:59 p.m. on Date of Service)

Your Current Rent Amount is \$ _____.

In accordance with the requirements of ORS Chapter 90, this is your 7-Day Notice of Rent Increase. Your Rent will be increased by \$ _____, to \$ _____, to be effective on _____.

(No less than seven days from the Date Served or 11 days if mailed ONLY, including the Date of Mailing)

Owner/Agent Signature: _____ Date: _____

Owner/Agent: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

Rents may not be increased during the first year of tenancy.

If notice is served by mail ONLY, the Ending Date must include an additional four (4) days to allow for the delivery of notice, including Date of Mailing.

This notice, if mailed, shall be mailed First Class Mail ONLY (not certified, registered, etc.).



SAMPLE

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