

# FIVE (5) DAY EVICTION NOTICE

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_  
\_\_\_\_\_

**You are hereby notified that you must vacate the premises owned by the undersigned, in Frederick County, Virginia within in five (5) days for failure to pay rent.**

**You have five (5) days from the date of receipt of this notice to pay or vacate the premises pursuant to section 55.1-1245 (f) of the Code of Virginia of 1950, as amended.**

**Total Amount Owed** \_\_\_\_\_

\_\_\_\_\_  
**Signature**

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

Receipt Number \_\_\_\_\_ Amount Received \_\_\_\_\_ CA/CK# \_\_\_\_\_

**\*\* NOTE \*\* \$12.00 per person service fee**

- Personal Service     Being unable to make personal service, a copy was delivered in the following manner:  
 Delivered to a family member (not temporary sojourner or guest) age 16 or older at usual place of abode of party named above giving information of its purport. List name, age of recipient, and relation of recipient to party named above.

Name, Age, Relationship \_\_\_\_\_

- Posted on front door or such other door as appears to be the main entrance of usual place of abode, address listed above (Other authorized recipient not found)  
 Not Found

Serving Deputy \_\_\_\_\_

Date \_\_\_\_\_ For \_\_\_\_\_ Lenny Millholland, Sheriff