



TENANCY AGREEMENT CANCELLATION FORM

1. Cancellation of tenancy agreement must be done in written either with this cancellation form or through OmaPSOAS. When giving notice the application for internal move expires.
2. Period of notice is one whole calendar month. The lease will end at the end of the month following the cancellation.
Apartment has to be cleaned before moving out. If the apartment is not properly cleaned the costs of cleaning will be charged from the tenant.
3. All tenants of the apartment are jointly responsible for the condition and cleaning of the apartment. Cleaning instructions can be found at www.psoas.fi.
4. Deposit will be refunded within a month from ending of the lease.
Keys of the apartment have to be returned to PSOAS office by 2 pm the last day of the month. If the last day of the month is weekend or holiday
5. the keys must be returned on the following working day by 12 pm. **Please check the right return point for the keys and read more about key return at www.psoas.fi.**
6. When the lease is cancelled janitor will check the apartment. Checks are done on weekdays between 9 am and 3 pm. The tenant will not be informed of the checking date beforehand and if the tenant is not home when the apartment check is done a maintenance key is used to enter the apartment.

☐ I have a pet, what _____

First name and last name: _____

Address: _____ Apartment no: _____ Lease end date: _____

Phone: _____ Email: _____

Future address: _____ Post code: _____ City: _____

Bank account no: Please send your bank account information for deposit refund at www.psoas.fi/en/housing-guide/refunding-the-deposit/

In order to improve our customer service we would be grateful if you told us the reason for your moving out.

Signatures. If the tenancy agreement is signed by more than one person, signatures of every signer of the tenancy agreement is needed.

City and date: _____

Written signature (tenant 1): _____ Written signature (tenant 2): _____

PSOAS FILLS IN

Irtisanominen vastaanotettu: _____ Vuokravastuu päättyy: _____

Sanottu irti koneelta: _____ Muuttoilmo. ilmoitetaan tarkastukseen: _____

With this cancellation I give PSOAS permission to give my contact information to the new tenant.

SEND TO

Pohjois-Suomen opiskelija-asuntosäätiö sr, Mannenkatu 6 A, 90130 Oulu or asuntotoimisto@psoas.fi