

## **INTENT TO SELL**

Property Address:	
Contact:	_
Address:	E-mail
Phone:	Cell
Placing on market (date)	
Listing Agent:	Company:
Phone:	Cell:
Address:	
Hor	neowner/Representative Statement
(ownersrepresentative manufactured home. I/we un for my/our monthly Co-op Feclosing, including any late fed date I/we will move from the I to the new resident on the date.	ands) hereby give a 30-day notice of intent to sell my/our derstand that I/we am/are financially and legally responsible as listed in my/our Occupancy Agreement, until the date of es. I/we further agree to notify Medvil Cooperative of the Medvil Cooperative Community. I/we will hand deliver keys the of closing or other mutually agreed upon date.
	H 03045 Tel: (603) 497-4440 ext. 2 Fax: (603) 497-4880
	state@gmail.com www.medvilcooperative.com