

NOTICE OF TERMINATION

Master number: _____, dated _____

Name: _____

Home address: _____

ZIP code: _____

Mobile phone no.: _____

Email: _____

I, _____, would like to give notice of termination for my student's residence place at _____, apt. _____, room no. _____, with effect from _____.

At the same time I would like to give notice of termination for my underground car park space no. _____ at _____ with effect from _____.

Please transfer my security deposit to the following account:

Name: _____

Bank: _____

IBAN: _____

BIC: _____

The student agrees and acknowledges that her/his room will have to be handed over on the last but one office workday in February in case of termination during the winter term, and on the last office workday during the summer term.

Receipt of the notice of termination at the WIST office shall be decisive for observance of the period of notice. The room shall be handed over to the management properly cleaned (including window frames, window panes, etc.) and painted.

Internet access shall be cancelled 6 weeks after termination of the agreement at the latest.

The certificate of deregistration issued by the City of Graz (Kapfenberg or Leoben) must be submitted to the management immediately!

WIST (Signature of management/received on)

Signature of student