## 7 DAY NOTICE OF NONCOMPLIANCE WITH RENTAL AGREEMENT\RULES AND/OR HEALTH AND SAFETY

LANDLORDS OF IOWA, INC.	DATE		
From:			
To Tenant[s]:			
Address:			
This is a 7 Day Notice that you have noncornoncompliance with Section 562A.17 mater	mpliance with the Rental Agreement/Rules and/or a ially affecting health and safety		
[Section;;	]		
1. "			
2. "			
Your acts and omissions constituting the vic	plations are as follows:		
1			
2.			
In order to remedy the violation[s], you must	t act as follows:		
1			
2			
be [Date] . If you hav	vs AFTER receiving this notice of your breach which will be not "cured" the violation[s] or remedied the breach by lease will terminate on that INSPECTION DATE of		
such proof that all violations are "cured" or i	as above] we will make an as are "cured." If you cannot or if you refuse to provide f we are unable to satisfactorily verify the information you we not "cured" the problem and your lease will terminate		
[LANDLORD\MANAGER\AGENT]			

AFFIDAVIT OF POSTING AND MAILING								
I serve	d this notice, this	of Day	Month	,	at Year	_ a.m. / p.m.		
to								
(Name of the person served)								
By:  Personal Service with signature acknowledgement by resident  Posting on the primary entry door, as well as sending certified and regular mail.								
(Signature of person accepting notice – Not required) (				(Landlord/	Owner/Mana	ager)		
Subscribed and sworn to before me this day of, 20								
Notary	Public in and for the	State of Iowa						