**EXTERMINATION NOTICE**

On  starting at

 (Date) (Time)

your apartment complex will be exterminated. In cases where no one is present, a master

key will be used to gain access into your apartment. If you have any questions, please

contact the site manager.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Site Manager

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date

 “This institution is an equal opportunity provider and employer”

** EQUAL HOUSING OPPORTUNITY**

 Revised 07/2014