

JDF 99



Notice and
Demand for Compliance
and Right to Possession

To: *(tenant's name)* _____

1. Grounds for Eviction

You must: *(check all that apply)*

☐ Pay the landlord \$ _____ for past due rent.
This is for missed payments due on: *(enter dates)* _____.

☐ Comply with the lease. *(Describe how the tenant is violating the lease.)*

For substantial violations under C.R.S. § 13-40-107.5(3), use JDF 97 – Notice to Quit.

2. Time to Cure

You can stop an eviction by fixing the problems above within the following time frame:

(select one)

☐ CARES Act Property: **30 days** from the service date.

CARES Act Properties include: See 15 U.S.C. § 9058(a)(2).

- Homes with a federally backed mortgage (FHA, VA, USDA, etc.); or,
- Those that participate in a federally subsidized housing program.

☐ Residential Agreement: **10 days** from the service date.

☐ Exempt Residential Agreement: **5 days** from the service date.

☐ Employer-provided Housing Agreement: **3 days** from the service date.

☐ Non-Residential Agreement: **3 days** from the service date.

I demand that you either cure the grounds for eviction stated above or deliver to the Landlord the possession of the premises located at:

3. Description of Premises

Street Address: _____

City: _____ County: _____

Subdivision: _____ Lot: _____ Block: _____

The rent for the premises is \$ _____ per _____.

4. Default

The grounds for eviction stated above constitutes default under the terms of the lease. This default entitles the Landlord to possession of the premises.

Note to Tenant – Right to Mediation

If you receive:

- Supplemental Security Income (SSI);
- Social Security Disability Insurance (SSDI); or
- Cash Assistance through the Colorado Works Program;

Then you may have a right to mandatory mediation, at no cost to you, before the landlord can start an eviction case in court. C.R.S. § 13-40-106(2).

If you qualify for one of the listed programs, let the landlord know in writing immediately.

5. Signatures

Signature (Landlord/Property Manager)

Date

Signature (Agent/Attorney)

Date

6. Service Date

I certify that on (service date) _____, I served this Notice by: (check one)

- ☐ Leaving a true copy with: (enter full name) _____
- ☐ By posting it in a conspicuous place at the premises described above.

Print Name: _____

Signature

Date