|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Notice of Neighbor’s Covenant Violation | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | «lname» | | | | | | | | |  | | | | | | | | |
|  | | *Landlord* | | | | | | | |  | | | | | | | | |
|  | *«laddress» «laddress2»* | | | | | | | | | | | |  | | | | | |
|  | | *Address* | | | | | | | | | | |  | | | | | |
|  | | | |  | | |  | | | | | | | | | | | |
| I, | | | «tname1» «tname2» | | | , reside at your property located at | | | | | | | | | |  | | |
| *(Print tenant’s name)* | | | | |  | | | |  | |  |  | | | | | | |
| «taddress» «taddress2» | | | | | | |  | |  | | |  | |  | | | |  |
| *(Address, city, state, zip)* | | | | | | |  | |  | | |  | |  | | |  | |
|  | | | | | | |  |  | | | | | | |  | |  | |

Minnesota Statute § 504B.161 requires that every landlord of residential premises, whether the lease is in writing or oral, do the following:

**(1) keep the premises and all common areas fit for the use intended by the parties;**

(2) keep the premises in reasonable repair during the term of the lease or license;

(3) maintain the premises in compliance with the applicable health and safety laws of the state.

Since parties to a lease or license of residential premises may not waive or modify the “covenants of habitability” imposed by this statute, the landlord must do these things regardless of any contrary lease terms (unless the tenant caused the disrepair by his or her willful, malicious, or irresponsible conduct).

I believe my premises is not fit for the use intended because of the following disturbances caused by neighbors:

«neighbor»\_\_\_«date»\_\_\_\_\_\_«incident»\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Neighbor) (Date) (Violation/Incident)*

«neighbor2»\_\_«date2»\_\_\_\_\_\_«incident2»\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Neighbor) (Date) (Violation/Incident)*

Please remedy this situation within fourteen days.

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

*(Signature) (Date)*