

Required Form Submit to Graduate Housing Office

Resident Information Sheet

Contract Holder Na	me:		
Apartment address:	Last Name	(Please Print)	First Name
Telephone number:	Office		
			Mobile/Other
Emergency Contact	Number:		
Household occupant	ts:		
Last Name	First Name	_	Relationship
Last Name	First Name	<u></u>	Relationship
Last Name	First Name	_	Relationship
Last Name	First Name		Relationship
Last Name	First Name		Relationship



Pet Information

All tenants with an apartment contract who have a pet, and keep that pet in their University owned apartment are required to carry Personal Property Protection and Liability Insurance. Liability Insurance must be carried in the amount of \$100,000.00.

Refer to paragraph # 13-J in the Terms and Conditions

Insurance Company: Personal Property Protection – Liabili				
Refer to paragraph #11 in the Terms and	Conditions			
Pets: this information required for those who wish to keep a pet				
Type/Breed/Description	Height	Weight		
Type/Breed/Description	Height	Weight		
Type/Breed/Description	Height	Weight		
I represent that the information provided is tro	ue, complete and accurate to	the best of my knowledge.		
Signature		Date		
Apartment Address				