



Furniture Accommodation Request

Part I: General Agreement

Date: _____

Building/Apartment: _____

I/We, the incoming residents, _____

agree and understand that:

- This agreement will prevent renovations and repairs beyond what is deemed necessary by Campus Apartments
- Cleaning and carpet cleaning of all bedrooms and common areas will be completed by the vacating residents before our Lease starts. Campus Apartments Management, LLC (Campus Apartments) will clean the above mentioned unit if the vacating residents do not complete the cleaning.
- When this agreement is executed, we accept responsibility for the furniture left behind by the previous resident. Campus Apartments will not be held responsible or liable for any furniture and/or personal belongings if/when repairs are made to the apartment.
- **This addendum does not give permission for us to occupy the above mentioned unit prior to 12:00 noon on our lease start date.**
- This form is a request, and that it is subject to approval by Campus Apartments.

I/We, the vacating residents, _____

agree and understand that:

- **This agreement allows us to leave behind only the specific articles of furniture listed on this fully executed document. Anything left in the house after 12:00 noon on the lease end date, unless specifically approved to remain via this document, will be considered trash. Fees will be charged for trash removal in accordance with the Resident Handbook.**
- **This agreement does not allow for us to stay in the unit after our lease end date and that we must vacate the unit by 12:00 noon on our lease end date.** We agree if the unit is not vacated by 12:00 noon on the lease end date, fees will be applied according to our lease agreement. The unit is not considered vacated if personal belongings or articles of furniture (excluding those articles specifically approved via this document) remain in the house.
- **We must have the above stated unit, including any carpets, professionally cleaned by a Campus Apartments approved vendor at our own expense prior to our lease end date.** We agree if we do not have the above mentioned unit cleaned, Campus Apartments will have it cleaned and any associated expenses will be deducted from our security deposit.



Part II: Furniture Inventory

Please use Part II of this form to provide us with details of what you would like left in the house between leases. We will use this information while reviewing your furniture accommodation request.

Please ensure that you have included every bedroom.

Note: We are not able to perform repairs in rooms filled with furniture. If repairs are required in a room you have requested a furniture accommodation for, this request may not be approved. In the event that we cannot approve your request, we will contact you to discuss options that we can approve.

GENERAL INFORMATION

ADDRESS: _____

CURRENT LEASE END DATE: _____

NEW LEASE START DATE: _____

COMMON SPACES (LIVING ROOM AND KITCHEN)

THIS SPACE WILL BE FULLY VACATED

WE WOULD LIKE FURNITURE (LISTED HERE) TO REMAIN IN THIS SPACE:

Notes from Campus Apartments Rep: _____

Approved: Yes No



BEDROOM _____

THIS SPACE WILL BE FULLY VACATED

WE WOULD LIKE FURNITURE (LISTED HERE) TO REMAIN IN THIS SPACE:

Notes from Campus Apartments Rep: _____

Approved: Yes No

BEDROOM _____

THIS SPACE WILL BE FULLY VACATED

WE WOULD LIKE FURNITURE (LISTED HERE) TO REMAIN IN THIS SPACE:

Notes from Campus Apartments Rep: _____

Approved: Yes No



BEDROOM _____

THIS SPACE WILL BE FULLY VACATED

WE WOULD LIKE FURNITURE (LISTED HERE) TO REMAIN IN THIS SPACE:

Notes from Campus Apartments Rep: _____

Approved: Yes No

BEDROOM _____

THIS SPACE WILL BE FULLY VACATED

WE WOULD LIKE FURNITURE (LISTED HERE) TO REMAIN IN THIS SPACE:

Notes from Campus Apartments Rep: _____

Approved: Yes No



Part III: Signatures

Vacating Resident Signature/Date

Incoming Resident Signature/Date

Vacating Resident Signature/Date

Incoming Resident Signature/Date

Vacating Resident Signature/Date

Incoming Resident Signature/Date

Vacating Resident Signature/Date

Incoming Resident Signature/Date

Vacating Resident Signature/Date

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Incoming Resident Signature/Date

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Incoming Resident Signature/Date

Vacating Resident Signature/Date

Incoming Resident Signature/Date

Address: _____

Date Submitted: _____

This form may be submitted in person to the office at 4043 Walnut St,
or via email to caphila.leasing@campusapts.com.

For apartments and houses with 4 or more bedrooms, forms are due no later than **April 1st, 2023**.
For apartments with 3 or fewer bedrooms, please submit this form at least **30 days** prior to the end of
your lease.

This request will not be reviewed unless signed by every vacating and incoming resident.
If not signed by an authorized agent of Campus Apartments, this agreement shall be considered null and void.

Auth. Agent Signature: _____

Date: _____