

Revised 5/4/2018

Instructions:

Please complete this form to request rental of residential space on behalf of a qualified Yale affiliate. Please forward completed forms to susan.cascio@yale.edu.

Requester Information											
Requested by:					epartment:						
Email:			PI	hone #:							
Yale Affiliate (Proposed Occupant) Information											
Name(s) of Yale Affiliate(s):					Relationship(s) to Yale:						
Name(s) of Additional Occupant(s):											
Rent and Tax Information											
Will the occupant reimburse the department for housing costs?			☐ Yes ☐ No		Is the occupant's Yale assignment expected to last one year or less? *			ed	□ Yes □ No		
What is the loca				Is the occupant expected to return to his/her					□ Yes		
occupant's curi					current tax home after completion of the Yale assignment?					□ No	
* If response is "No" and the expectation changes at a later date, the department is responsible for notifying University Properties at the time the work											
assignment is expected to last more than one year (from the first day of the work assignment). ** Generally, a Tax Home is the worker's regular place of business and includes the entire city or general area where his/her work is located.											
Reason for Residential Rental Request											
Rental Property Information											
Bedrooms:		Bathrooms	s:		Unit Type	:					
Address:		·	·		·						
Landlord Information											
Name: Email:					Phone #:						
Address for Billing:											
Lease Terms Information											
Proposed terms as of (date):				Lease Te	erm:		s	tart Date:			
Date of Possession:			Expiration	n Date:		Monthly Rate:					
Total Charges:		Security Deposit (refundable at en				nd of term):					
Additional Costs:											
Charging Instructions											
										-	
			Арр	orovals (S	Signatures)						
Office of the Pr	ovost:						Date:				
University Properties:							Date:				
Office of General Counsel:											