

OFF-CAMPUS HOUSING SUBLEASE INFORMATION FORM



Sublease Term: Summer Only Semester Year

Type of Housing: House Apartment Mobile Home Townhouse/Condo

Date Available: _____

General Area: _____

Close to: Downtown Campus Evansdale Campus
 PRT Station Bus Line

Address: _____

Rent: \$ _____ Deposit: \$ _____

Number of Bedrooms: _____ Number of Bathrooms: _____

Lease Required: Yes No

Utilities Included: Yes Some No

Gas Electric Water/Sewage Cable Internet

Parking: Yes No

Off-Street On-Street Garage

Pets: Yes No

Children Allowed: Yes No

Description of Rental Property: _____

CONTACT INFORMATION

Name: _____

Telephone Number: Cell _____ Home _____

E-Mail Address: _____

Date Submitted: _____