

House-Sitting Application

Shareholder Name: _____

Apt. # : _____ Home Phone: _____

Vacation Phone: _____

Local Contact Name: _____

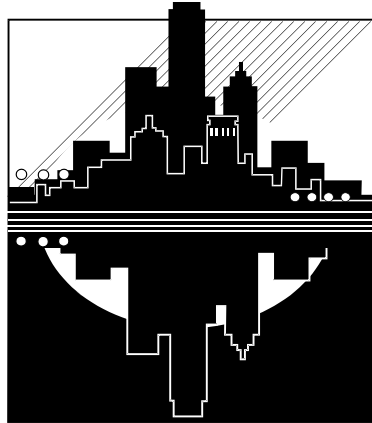
Home Phone: _____ Business Phone: _____

Dates of Absence: _____ – _____

I find it necessary to be away from my apartment for the brief period indicated above. During that time _____ will be staying in my apartment keeping an eye on things and has been informed about all house rules, security issues and recycling procedures. The Superintendent or _____ has all keys to my apartment. I understand that I am required to pay the Apartment Corporation 5% of the rent collected prior to occupancy.

Shareholder

Date



HOUSE - SITTER AFFIRMATION

I _____ will be staying in Apt. _____
from _____ to _____.

I have received a copy of the house rules.

I have been made aware of security issues and recycling procedures.

I understand that if I do not abide by the rules of the coop I will be asked to vacate.

If asked to vacate, I will do so within 48 hours notice.

House-Sitter

Date