

SV APARTMENTS FACULTY/STAFF APPLICATION *page 1 of 2*



Name: LAST FIRST M.I.

Permanent Address (# and Street) Email Address:

City State Zip Country (if not USA)

Male Female Home Phone: Cell Phone:

Requested Move-in Date: mm/dd/yyyy Departure Date: mm/dd/yyyy Birthdate: mm/dd/yyyy

POSITION INFORMATION

MSU Position: Department:
 ZPID:
 Department Contact Name:
 Department Contact Email:

Office Use Only

Resident RMS #
 File #
 PID #
 Fac #

APARTMENT PREFERENCES *(These preferences are based on availability and are not guaranteed.)*

<i>Please select one:</i>	<i>Please select one:</i>		Smoking
One-bedroom	Standard Furnished	Furnished	Yes
Two-bedroom	Renovated	Partially Furnished <i>(bed, dresser)</i>	No
		Unfurnished	No Pref

Comments:

ROOMMATE REQUEST

Will you have a roommate?: Yes No
(MSU Student or Eligible Staff)

Name: LAST FIRST
 Male Female PID or NetID: Email:

FAMILY INFORMATION

Other Occupant: LAST FIRST RELATIONSHIP TO LEASEHOLDER

Spouse: LAST FIRST

Children living with you:

LAST <input type="text"/>	FIRST <input type="text"/>	BIRTHDATE <input type="text"/>	mm/dd/yyyy	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>
LAST <input type="text"/>	FIRST <input type="text"/>	BIRTHDATE <input type="text"/>	mm/dd/yyyy	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>
LAST <input type="text"/>	FIRST <input type="text"/>	BIRTHDATE <input type="text"/>	mm/dd/yyyy	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>
LAST <input type="text"/>	FIRST <input type="text"/>	BIRTHDATE <input type="text"/>	mm/dd/yyyy	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>

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APARTMENT INFORMATION

Apartments are available for students, their spouses and children. Each student must complete this application and pay the \$40 **non-refundable** application fee. Applications for current academic year not honored by the end of spring semester will be cancelled. All assignments are made by date this office receives applications. **No pets are permitted** in University Apartments except for fish (excluding carnivorous or poisonous varieties). Leases expire May 15 every year unless approved by manager or contract release team for another date.

To pay by credit card, please visit the following web page and follow the directions to submit your \$40 application fee.

https://commerce.cashnet.com/msu_3460_CLS_UNIVAPTS?&itemcode=3460-SVAPPF

To pay by check or money order, in U.S. FUNDS, payable to Michigan State University, return application and fee to:

Spartan Village Leasing Office
Michigan State University
49 Middlevale Rd., Room 180
East Lansing, MI 48823

Applicant Signature:

Date:

mm/dd/yyyy

Phone: 800-678-4679 or 517-355-9550

Fax: 517-432-2093

Email: UAinfo@rhs.msu.edu

Website: www.liveon.msu.edu

Save this file and email it as an attachment to: UAinfo@rhs.msu.edu

Adobe Acrobat version 8.0 required to save and email.

OFFICE USE ONLY

Apartment Leasing Checklist

Initial and Date

Check appointment letter, offer letter, J-1

Check for PID or assign "99" number

Application fee of \$40 accepted and processed

Process application in RMS, RMS ID entered on application and in RMS

First month's rent received and processed: Cash Check CashNet Credit (in office) Other:

Lease completed with signatures and initials

Complete Payroll Deduction Form (if necessary)

Grade in RMS changed to (1)

Complete rate change letter (if necessary)