



ST. PAUL'S

Furniture Rental Form

Surname: _____

First Name: _____

Unit #: _____ Tel: _____

Email: _____

Furniture Package (Fee: \$400 per term):

Double bed, headboard & mattress

Kitchen table & 2 chairs

3-seat couch

Lounge chair

Desk, shelf unit with desk light and chair

Coffee table

Bureau

Terms for which Furniture Package is required (check all that apply):

Note: Payment in full for all terms is required at time of initial rental

Fall _____

Spring _____

Winter _____

I agree to rent the Furniture Package for the academic terms indicated, to pay the required fees at the time of rental and to abide by the provisions of the rental agreement as stated below.

Signed: _____

Date: _____

Rental Agreement: The Furniture Package is for tenants who have rented an unfurnished apartment in the Graduate Apartments at St. Paul's. The Package is not assignable to anyone else. The Tenant agrees to return the furniture to St. Paul's at the end of the rental period in the condition it was received in except for the effects of normal use. The Tenant agrees to pay the cost of repairing or replacing items of the Furniture Package that have been damaged while in the tenant's possession. The Landlord shall have final decision on whether an item requires repair or replacement.

For Office Use

Amount Received: _____

Date: _____