Rochester Institute of Technology
Housing Operations
63 Lomb Memorial Drive
Rochester, New York 14623
(585) 475–2572

Request to Accept Room/Apartment/Suite "As Is"

Please Print

Name _____ University ID # ☐☐☐00-☐☐☐☐

Email* _____ Phone Number _____

*RIT Housing Operations will communicate with you via your RIT email address. You are responsible for maintaining the email address and checking it consistently.

Where are you currently living?

☐ RIT Apartment/Suite/ Greek Free Standing — Complex _____ Apt. No. _____

☐ Residence Halls — Bldg. _____ Room _____

☐ RIT Inn — Room _____

☐ Off-Campus

What room/apartment/suite are you requesting to move into?

☐ RIT Apartment/Suite — Complex _____ Apt. No. _____

☐ Residence Halls — Bldg. _____ Room _____

☐ RIT Inn — Room _____

When are you requesting to move into your housing? _____

My signature below indicates that I understand and agree to the following:

- The apartment/suite/bedroom/bathroom I am requesting to move into will not be refreshed; therefore no painting, cleaning, or carpet cleaning/replacement will be completed during the time I am on contract for this space.
- I agree not to accept keys from a roommate or a former resident.
- Rent charges will begin on the date I have indicated above or the date I sign out my keys, whichever comes first.
- I understand that this request is pending an inspection by Facilities Maintenance. In the event there are conditions in the space that Facilities Management staff need to address prior to allowing occupancy, I understand this request may be denied and I would then need to remain in my current assignment or move to interim housing until the space is ready.
- If approved for move in "As Is", I understand I am responsible for reporting any conditions that exist in the apartment/suite/bedroom/bathroom at the time of my move in. I will complete the Move-In Condition Form, and submit to Housing Operations within 48 hours of my move in. Conditions reported that are part of a refresh, carpet cleaning, painting, and/or cleaning will not be addressed per this "As Is" agreement. In the event that there are conditions that require repair, I will submit a maintenance request online at http://facilities.rit.edu/request.

Signature _____ Date _____

Office Use Only

☐ Inspection Completed — Date _____ Initials _____

Approved for "As Is" ☐ Yes ☐ No — Reason _____

☐ Assignment Staff Notified

☐ Student Notified