



This form is to be used to seek approval and schedule the installation of air conditioners within RIT housing. Please be sure you have reviewed the guidelines before submitting this application. Submit the completed request to either Housing Operations office. Please print unless otherwise noted.

Apartment Information

Complex _____ Apt # _____

Air Conditioner Information

Owner _____ Number of units to be installed _____

Installation location(s) _____

Brand/Model _____ Year Manufactured _____

Guidelines for Air Conditioners in Apartments

RIT Housing Operations wants to provide a safe environment for all of the students residing in RIT housing. Therefore, installation of air conditioners must be completed by RIT Housing Operations staff only. If approved, you agree to pay a non-refundable charge of \$125.00 per season, per air conditioning unit for installation and utility expense. This charge will be divided equally among the residents who have signed the Air Conditioner request form. Charges will be placed on each student's account once the air conditioner is installed and inspected by RIT Housing Operations staff.

The typical season for use of air conditioners is late April to mid October. The non-refundable charge of \$125.00 per season, per air conditioning unit will be applied for any air conditioners approved for installation between April to mid October regardless of the actual number of months the student(s) use the unit. All air conditioners will be scheduled for removal during the month of October.

Any resident that installs an air conditioner without approval from RIT Housing Operations may face disciplinary action which, in addition to the \$125.00 charge, may result in the removal of the air conditioner and/or termination of the resident(s)' RIT housing contract.

Additionally, all residents to be charged must sign below and agree to abide by the guidelines stated above.

1 **Name** _____ University ID# -

Signature _____ Date _____

RIT Email _____

2 **Name** _____ University ID# -

Signature _____ Date _____

RIT Email _____

3 **Name** _____ University ID# -

Signature _____ Date _____

RIT Email _____

4 **Name** _____ University ID# -

Signature _____ Date _____

RIT Email _____

Office Use Only	Work Order # _____
	<input type="checkbox"/> Air conditioner has been approved/ installed. _____ Inspection/ Installation Date _____
	<input type="checkbox"/> Air conditioner has not been approved for installation (list reason and action). _____