

APPLICATION FOR SUB-LEASE

Leaseholder Information

Leaseholder (print or type): _____

University Lease Number: _____

Residence Address (E 911 street address): _____

Mailing address and phone number at which I may be reached during my absence from Sewanee:

I/we understand that I/we remain responsible for compliance with all of the terms of the lease with the University and for the payment to the University for the community garbage service charged against this lease. I/we have provided the sub-lessee with the information regarding the University lease for this property and the information about the community garbage service.

Date: _____ Signed: _____

Sub-lessee Information

Sub lease time period beginning _____ and ending _____

Name of sub-lessee(s) (print or type): _____

Mailing Address: _____

Telephone Number: _____

Relationship to Sewanee:

- School of Theology Faculty, Staff or Student
- University Faculty, Staff
- Other: Please Specify _____

I/we, as sub-lessee(s), affirm that we have been provided the information regarding the University lease covering the property and the information regarding the garbage service. I/we hereby agree to comply with all applicable terms of said lease and the garbage policy.

Date: _____ Signed: _____

The University hereby consents to the sub-lease of this property according to the terms and conditions set forth in this agreement.

Date: _____ Signed _____