

TEMPORARY OCCUPANCY AGREEMENT with RULES AND REGULATIONS

(students or visitors)

GUEST INFORMATION

- Site Location: _____ Bldg #: _____ Room: _____
- Guest Name: _____ M F
- Title or UF Affiliation: _____
- Guest Email: _____ Guest Phone #: _____
- Term: _____ to _____
- Rate: \$ _____ per day/week/period of stay is due in advance to Faculty Member or Resident Coordinator.
- Do you require ADA access? Y N
- No pets/animals allowed unless written permission is obtained from Center Director/Department Chairman.
Does Guest utilize an official service animal? Y N

RULES AND REGULATIONS

- Smoking is permitted in designated smoking areas only.
- Bicycle parking in designated areas only. You are responsible for securing your bicycle (with a lock).
- Garbage bin is located _____.
- Parking is located _____.
- No overnight guest permitted without Center Director/Department Chairman approval (on a per night basis).
- Please keep noise to a minimum.
- Please do not open any windows.
- All occupants are responsible for cleaning their respective areas as well as bathrooms and kitchen (including microwaves, stove, sinks, counters, etc.) after each use.
- No food allowed in bedrooms.
- Furniture is to remain as is. No waterbeds allowed.
- Bed linens _____ will be / _____ will not be provided.
- Loss of any keys (housing or gate) will result in a \$10 fee for replacement.

- Amendment attached? Y N

UNIVERSITY OF FLORIDA CONTACTS:

Maintenance: _____
(name) (phone number) (hours)

Security: _____
(name) (phone number) (hours)

Faculty Member or
Resident Coordinator: _____
(name) (phone number) (hours)

University of Florida/IFAS hereby grants to the Guest identified above conditional permission to occupy the above-specified temporary dwelling unit for the period indicated herein, subject to the rules and regulations listed above. Failure to abide by such rules and regulations is cause for immediate termination of this Temporary Occupancy Agreement, and the Guest's immediate expulsion from the dwelling unit/facility.

_____ I, the undersigned Guest, have received, reviewed, understand, and have been provided a copy of, this Temporary Occupancy Agreement. I acknowledge and agree with all terms and conditions as provided herein. I agree to abide by all rules and regulations pertaining set forth in this Temporary Occupancy Agreement and all other rules and regulations that apply to University of Florida property.

_____ I, the undersigned Guest, understand that my personal belongings are not covered by any University of Florida insurance in the event of fire, theft, flood, or other casualty, and that I am responsible for my own health insurance coverage.

_____ I, the undersigned Guest, in consideration of being allowed to temporarily occupy the dwelling unit, hereby release and forever discharge, indemnify, and holds harmless the University of Florida, its trustees, agents, employees, officers, directors, representatives and affiliates of and from any and all demands, actions, causes of action, suits, damages, claims, liabilities and costs whatsoever, including attorneys' fees, of every name and nature which the undersigned may have for or by reason of any injuries, damages, claims or other matters whatsoever arising out of or related in any way to the undersigned's occupancy of, or presence at, the dwelling unit and related facility.

Guest Signature and Date

Center Director/Department Chairman
or Assigned Designee Signature and Date

Faculty Member or Resident Coordinator
and Date

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Date of Departure: _____ Room Inspection: _____ Key Return: _____

Guest Signature and Date

Faculty Member or Resident Coordinator Signature
and Date