

Vacate Notice - Academic Staff Housing

Please submit this completed form to the Housing Office at least 30 days prior to your requested vacate date. Please note that this form is designed to be completed electronically using Adobe Acrobat, which can be <u>downloaded from the ITS website</u>. Fields marked with an asterisk (*) are required.

Please make sure to review the move-out procedures for your building on the Housing website.

		<u> </u>	
Resident Information			
Last Name*		First Name*	
Primary Phone*		Building*	Apt. Number*
Weill Cornell Email*		Personal Email*	
Resident Type* Posto	doc. C Faculty		
Vacate Date	Move-outs are not permi	tted on Sundays and holida	ys.
ecurity Deposit Refund		2, and paid a \$500 non-fund	able move-in fee, do not complete t
VCM Finance Department	ed States, you will receive your refund	te date to process the refund.	e your new mailing address. Apt. Number
City		State	Zip
you will reside outside of the formation below.	the United States, you will receive you st match your (the primary resident's) r	ur refund via electronic funds tran	nsfer (EFT). Please provide your banking
Account Number		IBAN Number	
		Swift Code	
	as noted in my building's Vacate Proc concerning checkout requirements, p		oplied with the terms of the Weill Cornell turn of security as filed above.
Signature of Primary Reside	nt*		Date*