



## 2016 – 2017 RENEWAL INTENT FORM

The Renewal Intent Form, along with an Online Application (with \$25 Application Fee) for 2016-2017, must be submitted to the office by January 15<sup>th</sup> to receive the renewal rate (the application fee can be paid online at [www.live929.com](http://www.live929.com)). A License Agreement will then be emailed to you which must be returned to the office by January 31<sup>st</sup>. All renewal forms and applications received after January 15<sup>th</sup> will receive the standard 2016-2017 rates for new residents.

YES  NO I would like to return to my **same apartment and bedroom.** Apt & Room \_\_\_\_\_

YES  NO I would like to move to a **different apartment.** (please indicate below) Apt & Room \_\_\_\_\_

If YES, you would like to move to the following **different unit type:** (if available)

- |  |  |
|--|--|
| <input type="checkbox"/> Studio Apartment                                  | <input type="checkbox"/> Furnished 1-Bedroom                               |
| <input type="checkbox"/> Furnished L-Shaped 1-Bedroom                      | <input type="checkbox"/> Unfurnished 1-Bedroom                             |
| <input type="checkbox"/> Furnished L-Shaped 1-Bedroom                      | <input type="checkbox"/> Unfurnished 1-Bedroom                             |
| <input type="checkbox"/> Semi-Furnished 2-Bedroom (bedroom furniture only) | <input type="checkbox"/> Semi-Furnished 1-Bedroom (bedroom furniture only) |
| <input type="checkbox"/> Furnished 2-Bedroom (Full Apt)                    | <input type="checkbox"/> Unfurnished 2-Bedroom (Full Apt)                  |
| <input type="checkbox"/> Furnished 2-Bedroom (Single Bedroom)              | <input type="checkbox"/> Unfurnished 2-Bedroom (Single Bedroom)            |
| <input type="checkbox"/> Furnished 4-Bedroom, 2-Bath                       |  |

### Apartment Details:

- City View (facing Wolfe Street, or floors 12-20 facing garage)  
 Garage View (Floors 2-11 facing garage)  
 No Preference

YES  NO I will be requesting to **pull in roommates** who are not current residents. You must notify requested roommates to submit their required paperwork (\$25 Application Fee, Application, \$200 Community Fee, License Agreement, and Roommate Matching Card) requesting your apartment as early as possible (accepting applications now).

I want to live with: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
Name Name Name

- ✓ I understand if I want to live with someone who is not a current resident, I must discuss this with my current roommate(s) to decide who will be returning and/or who will be leaving. I further understand that submission of this form does not guarantee a specific space if moving to an apartment other than my current assignment.
- ✓ I understand I will lose my guaranteed renewal rate, for the 2016-2017 year, if I fail to submit this form by and the application fee (\$25) by January 15<sup>th</sup>; and, the License Agreement by January 31<sup>st</sup>.
- ✓ I understand I will lose my priority, with the possibility of losing housing in the 929 Apartments entirely, for the year 2016-2017, if I fail to notify the office of my intent to renew or complete all required steps by February 15<sup>th</sup>.

Name \_\_\_\_\_ Apt & Bedroom \_\_\_\_\_

Email \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

- Affiliation    \_\_\_ School of Medicine            \_\_\_ School of Nursing            \_\_\_ School of Public Health  
                   \_\_\_ Johns Hopkins Hospital        \_\_\_ Johns Hopkins Employee     \_\_\_ Kennedy Krieger  
                   \_\_\_ Local College/University (please indicate campus) \_\_\_\_\_  
                   \_\_\_ Work In The Area? (please indicate where) \_\_\_\_\_  
                   \_\_\_ Other (please indicate) \_\_\_\_\_

