**Apartment Agreement**

**Building**: **Apartment**:

Completed On:

Open communication is an integral part of living together. This document is designed to facilitate a dialogue between the users of a shared space. The following should take place during your discussion:

* articulate one’s own needs in this shared apartment space,
* converse about personal habits and expectations,
* connect around values and personal living expectations, and
* discuss one another’s understanding of how one works through conflict utilizing your strengths.

One of the most common causes of roommate conflict is lack of communication. Use this document to have a dialogue about one another’s values and strengths prior to writing decisions down. It is important to be honest and open while you complete this form to make it fair for everyone involved. Please return this form electronically (via email) to your Resident Assistant (RA) within one week of moving into your residential space. Agreements will be reviewed, kept and consulted should mediation be necessary. Should you wish to revisit your agreement consult with your RA.

**Maintaining Shared Space**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Our space will be kept: | Spotless Clean Moderately Clean Lived In | | | |
| We will clean: | Daily Weekly Biweekly Monthly As Needed | | | |
| Our **shared** definition of clean is: |  | | | |
| We agree cleaning is the responsibility of: |  | | | |
| We agree on the following shared space layout: |  | | | |
| When decorating shared space, we agree to: |  | | | |
| Living Room space is used for: | Watch TV Host Guests Do Homework  Video Games Other: \_\_\_\_\_\_\_\_\_\_\_ | | **How Long?** | |
| Our agreed upon TV usage in shared space is: | 30 min 1 Hour 2 Hours Unlimited | | | |
| Our agreed upon apartment temperature is: | Hot Warm Cool Chilly | Temperature Range: | | |
| We will accommodate those with allergies, sensitivities’ or dietary preferences by: |  | | | |
| If a person is 21 or older within the apartment, Approved alcohol is stored where: | Individual Bedroom Kitchen Fridge Designated Cabinet | | | |
| We are our cleaning expectations for university breaks or extended times away from apartment are: |  | | | |
| **Kitchen/Dining Task** | **Who is responsible?** | **How often?** | | **Rotation?** |
| Sweep/Mop/Vacuum |  |  | |  |
| Remove trash |  |  | |  |
| Remove recycling |  |  | |  |
| Clean sink area |  |  | |  |
| Wash dishes/ dishwasher |  |  | |  |
| Appliance care: stove |  |  | |  |
| Appliance care: microwave |  |  | |  |
| Appliance care: other |  |  | |  |
| Food Disposal |  |  | |  |
| **Living Room Task** | **Who is responsible?** | **How often?** | | **Rotation?** |
| Sweep/Mop/Vacuum |  |  | |  |
| Remove trash |  |  | |  |
| Clean sink area |  |  | |  |
| Clean toilet |  |  | |  |
| Clean shower/tub |  |  | |  |
| **Bathroom Task** | **Who is responsible?** | **How often?** | | **Rotation?** |
| Sweep/Mop/Vacuum |  |  | |  |
| Remove trash |  |  | |  |
| Clean sink area |  |  | |  |
| Clean toilet |  |  | |  |
| Clean shower/tub |  |  | |  |

**Space & Item Sharing**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **How will we share space?** | | | | |
| **Kitchen:** Refrigerator/Freezer | |  | | |
| **Kitchen:** Pantry/Cabinets | |  | | |
| **Bathroom:** Counter Top**/**Cabinets | |  | | |
| **Bathroom:** Shower Shelving/Linen Closet | |  | | |
| **Bedroom:** Closet | |  | | |
| The following space is off limits to share: | |  | | |
| **What items can be shared without permission?** | | | | |
| 🞎 | Cookware | | 🞎 | Toilet paper |
| 🞎 | Plates | | 🞎 | Paper towels |
| 🞎 | Cups | | 🞎 | Toiletries/personal care items |
| 🞎 | Silverware | | 🞎 | Towels |
| 🞎 | Food | | 🞎 | Soap/hand soap |
| 🞎 | Drinks | | 🞎 | Cleaning supplies |
| 🞎 | Paper Goods | | 🞎 | Any items |
| 🞎 | Pillows/Blankets | | 🞎 | Other: |
| **What items may only be used by asking the owner’s permission?** | | | | |
| 🞎 | Cookware | | 🞎 | Toilet paper |
| 🞎 | Plates | | 🞎 | Paper towels |
| 🞎 | Cups | | 🞎 | Toiletries/personal care items |
| 🞎 | Silverware | | 🞎 | Towels |
| 🞎 | Food | | 🞎 | Soap/hand soap |
| 🞎 | Drinks | | 🞎 | Cleaning supplies |
| 🞎 | Paper Goods | | 🞎 | Any items |
| 🞎 | Pillows/Blankets | | 🞎 | Other: |
| **Any Additional Details?** | | | | |

**Purchases for Apartment**

|  |  |  |  |
| --- | --- | --- | --- |
| **What items will be bought together as a group?** | | | |
| 🞎 | Cookware | 🞎 | Toilet paper |
| 🞎 | Plates | 🞎 | Paper towels |
| 🞎 | Cups | 🞎 | Toiletries/personal care items |
| 🞎 | Silverware | 🞎 | Towels |
| 🞎 | Groceries | 🞎 | Soap/hand soap |
| 🞎 | Drinks | 🞎 | Cleaning supplies |
| 🞎 | Paper Goods | 🞎 | Other: |
| 🞎 | Decorations | 🞎 | Other: |

**Personal/Shared Items:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| May be left in the: | 🞎 Living Room | 🞎 Kitchen Counter | 🞎 Kitchen Sink | 🞎 Dishwasher | 🞎 Bathroom Counter | 🞎 Shower |
| May not be left in the: | 🞎 Living Room | 🞎 Kitchen Counter | 🞎 Kitchen Sink | 🞎 Dishwasher | 🞎 Bathroom Counter | 🞎 Shower |
| May never be left: | 🞎 Living Room | 🞎 Kitchen Counter | 🞎 Kitchen Sink | 🞎 Dishwasher | 🞎 Bathroom Counter | 🞎 Shower |
| **Any Additional Details?** | | | | | | |

**Sharing Bathroom**

|  |  |  |  |
| --- | --- | --- | --- |
| **When someone is in the bathroom:** | | 🞎 | No one will enter |
| 🞎 | It is always ok to enter the bathroom | 🞎 | We will knock before entering |
| Shower Times | | | |
| 🞎 | We will set a schedule | 🞎 | Ask if anyone needs shower first |
| 🞎 | We will limit our showers to \_\_\_\_minutes | 🞎 | We have no time limit on showers |
| 🞎 | Showers will be used on first come, first serve basis |  |  |
| **Any Additional Details?** | | | |

**Guest Policy**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| We agree that having guests should be communicated: | | In advance: 1 Day In advance: Same Day Unannounced/Whenever | | |
| We agree that the following number of people can be in the apartment at one time: | |  | | |
| Visiting is acceptable when: | |  | | |
| Overnight guests must be shared in \_\_\_ days in advance | |  | | |
| Our agreed upon overnight guest sleep location in the apartment is: | |  | | |
| 🞎 | it is ok for guests to use the bathroom | | 🞎 | guests may use the toilet but not the shower |
| 🞎 | it is not ok for guests to use the bathroom | | 🞎 | it is not ok for guest to use the bathroom between \_\_\_\_and \_\_\_\_ |
| **Any Additional Details?** | | | | |

**Safety**

|  |  |
| --- | --- |
| **We agree to take safety precautions for the safety of one another and our belongings, which include the following:** locking our doors and windows, not loaning out our keys to others and reporting lost or damaged keys to Residential Living & Learning staff immediately. | |
| Our bedrooms are locked when: |  |
| Our front door is locked when: |  |
| Our windows can be open when: |  |
| Our blinds can be open when: |  |

**Communication**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Quiet in our apartment is:** | |  | | |
| **Sleeping/naps are acceptable when:** | |  | | |
| **Quiet Times are:** | |  | | |
| **When we have a concern in the apartment we will communicate how?** | | | | |
| 🞎 | In person | | 🞎 | Text Message |
| 🞎 | Leave a note on door | | 🞎 | Other |
| **If conflicts develop, how will they be handled? If initial efforts are unsuccessful, what will the next step be?** | | | | |

**By signing my name below, I agree to comply with the above apartment agreement terms and will complete all tasks, assigned to me, in the above agreement. I understand that I may be held responsible for the agreed upon terms above.**

Resident 1 (Print Name and Sign) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Resident 2 (Print Name and Sign) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Resident 3 (Print Name and Sign) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Resident 4 (Print Name and Sign) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_