## Schedule A

## Address:

## Make Rent Checks Payable to:

Resident Name(s)	E-mail Address	Contact Phone #
1		
2		
3		
4		
5		
6		
7		
8		
Designated Resident	Designated Resident's E-Mail	Phone #
	_	
Lease Terms		
Begin End		
Monthly Installments		
Monthly Installments Total Rent		
Security Deposit		
Non-refundable apt. prep fee		
Utilities - Resident Responsibility		
Gas Electric	Water %	
Prorata Prorata	Sep. Meter	-
Sep. Meter Sep. Meter		
	Furnished	
Yes Standar	rd Per Room: Bed, desk, Dresser, Common Area: couch chair, coffe table, dining table	
No Other	Other	
Addendums to Lease: Resident shall pay, in add		
One time pet fee of	Monthly pet	fee of
Monthly laundry fee of		
1 Parking spaces at	1 Parking spaces ateach per month1 Included parking spaces	
Other		
Initials:		
Landlord:	Date:	
Residents: Date:		