AN CLACHAN BIKE ROOM APPLICATION FORM

Queen's University – Community Housing, 169 University Ave, Kingston, ON, K7L 3N6 community.housing@queensu.ca, fax 613.533.2196



APPLICATION PROCEDURES

Services, Queen's University.

- -One application must be filled out for EACH BIKE that you are requesting permission to store in a bicycle room.
- -A photo of the bike must accompany the application. Only bikes in working condition may be stored.
- -Submitting an application does not guarantee you a space in a bike room.
- -Community Housing reserves the right to limit the number of bikes available to be stored by a single apartment.
- -Successful applicants will be assigned to a particular bike room and issued a key and permit sticker.

APPLICANT INFORMATION	
Family (Last) Name	
Legal Name(s)	
Apartment # (e.g 01-101)	
Bicycle Model	
Bicycle Colour	
Email Address	
TERMS & CONDITIONS -Storage is at your own risk. Appendix A, se	ection 17 of your Tenant Handbook (Landlord's Liability) applies.
-Your bike MUST be placed on the storage	hook and not left on the ground.
-Permitting access to the room to others w prohibited and will result in your access be	ho have not been granted access or storing unauthorized items/bikes is strictly ing revoked.
The permit sticker must be placed on the half be been a bicycle room without a valid permit sticker.	head tube (front of the bike just below the handle bar stem). Any items/bikes found in er will be removed.
-Lost keys will result in a charge of \$125.	
-Your bike must be removed from the stora bike storage that belongs to a vacated tena	age room and key returned to our office when you vacate. Any bicycle found in the ant will be discarded immediately.
must be removed by the time/date indicate	to use this storage area at anytime with written notice. If such notice is given, the bike ed in the notice or it will be discarded. • the Terms and Conditions for bike storage as set out above.
Applicant's Signature	Date

Office Use Only

Date Received: ____ /___ __ Date Entered in Yardi: _____ /___ Initials: _____ Storage Rm: _____

Bike Tag Number: _____ Date Issued: ____ / ___ / ___ Initials: _____ Rev2020-03-01

as amended. It will be used to determine and verify your eligibility for rental accommodation and for uses consistent with that purpose. If your application is accepted, this personal information will be used to operate and administer the services provided by Community Housing and for uses consistent with that purpose. Direct questions expressly related to the collection and use of this information to the Office of the Executive Director, Housing and Ancillary