

# ROOMMATE AGREEMENT

This form was created to aid in communication between roommates about expectations and to define basic guidelines for their living arrangement.

Roommates: \_\_\_\_\_  
\_\_\_\_\_

This agreement will be in effect from \_\_\_\_\_ to \_\_\_\_\_.

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## Money and Property Matters

Rent Amount: \_\_\_\_\_ Date the Rent is Due: \_\_\_\_\_  
How will rent be paid? \_\_\_\_\_

Security Deposit: \_\_\_\_\_  
Each roommate will be responsible for their share of the charges accrued by damages.

Utilities & Responsibilities: (Please put whose name is on the account and how bills will be split.)

Included _____	Gas heat _____
Water/Sewer _____	Electricity _____
Trash _____	Telephone _____
Cable/Sat TV _____	Internet _____
Newspaper _____	Snow removal _____
Lawn care (mowing, watering, raking, weeding) _____	
Other _____	

Household Supplies: (This includes everything from light-bulbs to paper towels to dish soap.)  
Cost and Supply \_\_\_\_\_

Food:  
What will be shared? \_\_\_\_\_  
What will not be shared? \_\_\_\_\_  
What can guests eat? \_\_\_\_\_  
How will the cost be divided? \_\_\_\_\_

Shared Property:  
Cookware \_\_\_\_\_  
Furniture \_\_\_\_\_  
Electronics \_\_\_\_\_  
Washer/Dryer \_\_\_\_\_  
Other \_\_\_\_\_

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## Space Use

Cleanliness: (Please indicate how often & by whom areas will be cleaned. What does "clean" mean?)  
Common Areas \_\_\_\_\_  
Kitchen and Dishes \_\_\_\_\_  
Bathroom(s) \_\_\_\_\_  
Laundry \_\_\_\_\_

**Space Use (continued)**

Personal Space:

What is off-limits to roommates? \_\_\_\_\_  
What is off-limits to guests? \_\_\_\_\_  
How will you indicate that you want to be left alone? \_\_\_\_\_

Guests:

When is it ok to have overnight guests? \_\_\_\_\_  
When is it not ok? \_\_\_\_\_  
How often can there be overnight guests? \_\_\_\_\_  
How many people can visit at one time? \_\_\_\_\_  
What time should guests leave during the week? \_\_\_\_\_  
What time should guests leave on the weekend? \_\_\_\_\_

Quiet/Study Time:

What times are "quiet hours" during the week? \_\_\_\_\_  
What times are "quiet hours" on the weekend? \_\_\_\_\_  
Where are the "study areas?" \_\_\_\_\_

In our apartment, the following are:

Smoking is permitted/not permitted.	How much/often? _____
Alcohol is permitted/not permitted.	How much/often? _____
Illegal drugs are not permitted.	Never allowed

Our Pet Policy: (include responsibility of costs and care, see Lease) \_\_\_\_\_  
\_\_\_\_\_

Parking spots, carport, garage: \_\_\_\_\_

Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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By signing this agreement, we acknowledge that all roommates have equal rights and responsibilities to all common areas and our own individual private spaces. Each roommate is encouraged to keep a copy of this record. All items are subject to lease agreement with landlord.

Roommate _____	Date _____
Roommate _____	Date _____
Roommate _____	Date _____
Roommate _____	Date _____