Tenancy Contract

We the undersigned, in consideration of the mutual promises herein contained have agreed to

become roommates and co-tenants at: (list address, including apt #, if applicable, city and state) for the term of ______ months, beginning on the _____ day of ______, 2____, and terminating on the _____ day of ______, 2____. A.) By signing below, I realize that I am responsible to my undersigned co-tenant(s) for my share of the rent (\$_____), paid monthly, for the entire term stated above. Any changes in this responsibility must be agreed upon by all tenants with a written statement of the changes being signed by all tenants and attached to this contract. **B.)** I will pay my share of the rent for the above dwelling to: ______ at ______, ______, ______, (city) (name) (state) **C.)** List below any agreements such as telephone, cable and utility bill payments and deposits, pet deposits, groceries, furniture, etc. in this section. Attach additional sheets if necessary. This section should also include any agreements with respect to noise, smoking, overnight guests, etc. **D.)** All obligations under this contact are to performed in ____ (city) (county) (state)

Signature of Tenant			Date
Printed Name	Phone	Email	
Tenant Emergency Contact		Relation	
Phone number	Email		
certify that all information prov	ided on this document is true and co	rrect.	
Signature of Tenant			Date
Printed Name	Phone	Email	
Tenant Emergency Contact		Relation	
Phone number	Email		
certify that all information prov	ided on this document is true and co	rrect.	
Signature of Tenant			Date
Signature of Tenant Printed Name	Phone	Email	Date
Printed Name	Phone		
Printed Name			
Printed Name Tenant Emergency Contact Phone number		Relation	
Printed Name Tenant Emergency Contact Phone number	Email	Relation	Date
Printed Name Tenant Emergency Contact Phone number I certify that all information prov	Email	Relation	
Printed Name Tenant Emergency Contact Phone number I certify that all information prov Signature of Tenant Printed Name	Email ided on this document is true and co	Relation rrect. Email	
Printed Name Tenant Emergency Contact Phone number I certify that all information prov Signature of Tenant Printed Name	Email ided on this document is true and co	Relation rrect. Email	Date

Each tenant should receive copy, not necessary to be notarized or witnessed to be effective