



401 West 130<sup>th</sup> Street, New York, NY 10027  
 Phone 917.507.0070 - Fax 917.507.0019

## LICENSE CANCELLATION REQUEST FORM

**1** Your License Agreement binds you financially to your housing assignment for the entire license term. By completing this form you are requesting a release from the financial responsibility of your housing assignment. There is no requirement for The Towers to allow release of the License Agreement outside the terms stated in the agreement. A release from the License Agreement depends on the approval of this request. All requests will be reviewed on a case-by-case basis, therefore please allow at least 15 business days for a decision to be made and communicated to you in writing. Please be clear in providing your current contact information and attach supporting documentation. Initial: \_\_\_\_\_ (I have read and understand this information).

**2** Please Print Clearly and Legibly

University ID:		Requested Check Out Date:**	/ /
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Last Name:		First Name:	
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Unit:		School Attending:	
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**The Towers will contact you using the information you provide below.**

Preferred Email Address:		Email Address:	
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Phone:	(       )	Alt. Phone:	(       )
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Address:		Apt:	
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City:		State:		Zip:	
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\*\* For information only. If your request is approved, charges will be adjusted based on date reflected on your official check-out form.

**3 REASON FOR REQUEST** (Please write a brief description of why you are requesting a release from your Housing License and attach any supporting documentation to this form)

**4** I understand that if I am granted a release, any financial adjustments will be made according to my official release date and the date of check out. Initial here: \_\_\_\_\_

**5** The Towers will transfer your license to the next applicant of the same gender and apartment request type on the waitlist **when there are no vacancies at The Towers**. Priority of petitions for license cancellation will be granted based on DATE RECEIVED. **Release is not granted until a completed license is signed by a qualified waitlist applicant.**

**6** Please acknowledge that you have read and understand the Request for License Agreement Release Guidelines on the reverse side by initialing here: \_\_\_\_\_ (required for processing)

**7** All information on this form and in the required documentation is true and complete to my knowledge. I understand that falsification of information can lead to my request being nullified. I understand that this is **only a request** and is subject to the release process as explained in the Request for License Agreement Release Guidelines on the reverse side of this form. The Towers reserves the right to review each request on a case-by-case basis. (This form must be completed in its entirety to be considered and must be accompanied by supporting documentation, or it will be returned to the student in DENIED status).

Student Signature:		Date:	/ /
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**For Office Use Only**

Date Received:	Staff Initials:
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Decision:	Notification Date:
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New Lessee Name:	Date New Lease Signed:
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## License Cancellation Request (LCR) Guidelines

- You are requesting a release of your financial obligation for the current license term with respect to your housing assignment.
- Choosing to leave your housing assignment does not release you of your financial obligations agreed to by your original license agreement. Your license agreement is for the entire license term.
- If your request to be released from the license agreement is approved your room charges will be adjusted based on your official release date and your signed move out form. Please be mindful that you are not paying monthly rent so your financial obligation is not pro-rated on a daily basis. Your account will be adjusted by a proportion of your remaining installments due.
- If your request is denied you are fully responsible for all of your license fees for the entire license term.** Should you check out of The Towers prior to a decision on your LCR and later opt to return following a denial please be aware that your original assignment may not be available. Re-assignment will be made based on availability.
- Submit the completed LCR and supporting documentation to The Towers Housing Office; attn. Assistant Director of Housing.
- You will be notified via email with our final decision.
- Allow at least fifteen business days from date of approval or date of official check-out following approval, whichever is later, for adjustments to be posted to your housing account.

### SCHEDULE OF FINANCIAL RESPONSIBILITY

(in accordance with CCNY Policy)

Approved prior to the start of classes	Refer to housing license agreement for financial responsibility
Approved first 3 calendar weeks of classes	Refer to housing license agreement for financial responsibility
Approved 3 or more calendar weeks after classes begin	Liable for 100% of license agreement fee.