

Exposé for a Private Room in a Shared Apartment

Address: _____

Available from: _____ District: _____

Size of the room: _____ m² Floor: _____ Lift Accessible

Monthly rent: _____ € inclusive: _____

Security deposit: _____ € further costs in €: _____

Minimum rental period: _____ Maximum rental period: _____

Number of guests: _____ Flat-/Housemates: _____

Are pets present? if yes, which: _____

Separate entrance Separate bathroom Private kitchenette

Wi-Fi

Additional conveniences:

Contact Person

Surname, first name: _____

Telephone: _____ Email: _____

Declaration of Consent

I agree that the details of my accommodation and my contact information will be stored and processed in the internal database of ERG Univeristäts-service GmbH. I also agree that this data will be passed on to interested international guest researchers of Freie Universität Berlin.

Please complete this form and send it together with photos of the room and shared ares to ERG Universitätsserve GmbH by email: accommodation-service@fu-berlin.de.