

REQUEST FOR APPROVAL OF NON-UNIVERSITY FURNITURE

Resident's Details

Family Name:

Given Name:

University Hall Deirdre Jordan Village Room Number:

Mobile Telephone:

Instructions

- To ensure that it does not pose a hazard to the community or unnecessarily crowd or detract from the appearance of a shared living area in which you intend to place it, you must first obtain approval from the Facilities Management Support Officer (FMSO) to bring any item of non-University furniture into the precinct.
- Please complete and submit this form to Flinders Living Administration. The FMSO (or delegate) will either (a) notify you of the decision based on the information and photographs you submit or (b) arrange a mutually convenient time to visit your unit/room to inspect the item.
- If you are in agreement for this inspection to be conducted in your absence please tick here.
- To minimise damage to furniture and fittings you should not remove a University bed frame or mattress from your bedroom without first consulting the Maintenance Officer.
- Charges will apply for any furniture removal that needs to be undertaken to correct inappropriate removal or placement of University furniture.
- Attach up to three (3) photographs of each item and email to residential.services@flinders.edu.au.
- Providing good quality photographs may obviate the need for an inspection and allows for approval prior to the commencement of term and arrival on-campus.

Request for Approval and Inspection

I request approval for the following items to be kept in my room/common area:

	<i>Detailed description of item (including where appropriate the brand/model, colour of the item, type of upholstery or fabric, etc.)</i>	<i>Approximate Year of Manufacture</i>	<i>Approval Granted Yes or No</i>
1.			
2.			
3.			

Resident's Signature: Date:

Staff Member's Signature: Date:

Reasons for Non-Approval and Required Date of Removal

- I have not approved the following item(s) to be kept within the Flinders Living Precinct for the following reasons:

<i>Item Number (from previous page) and summary statement of reasons for decision</i>	<i>Items to be removed by (DD/MM/YYYY)</i>

Staff Member's Signature:

Date:

Flinders Living Administration Staff Use Only

- Decision could be made on basis of photographs supplied: Yes No Not applicable

- Resident was present during inspection: Yes No Not applicable

Signature:

Date:

- Copy of this form scanned and sent to resident's student email account

Signature:

Date:

- Re-inspection to ensure that non-approved items have been removed was conducted.

Yes No

- Resident was present during re-inspection: Yes No Not applicable

- Post re-inspection copy of this form scanned and sent to resident's student email account.

Signature:

Date:

- Non-approved items remain in the room/unit. Referred to Deputy Principal for further action.

Signature:

Date: