

**SUBLET ADVISORY ONLY**  
**(completed by current residents)**

**Information Needed by Management Office Only**  
**Sublet Fee \$200 – Please submit with this form**

**The resident (temporarily) leaving becomes the landlord for the sublettor and takes responsibility for their actions and rent payments: Paperwork cannot be processed until Sublet Fee is paid in full.**

- The sublettor needs to submit an application and a photo ID to Puffton Village Apartments for approval. They can apply on-line through our website pufftonvillage.com.
- It is your responsibility to ensure that your sublettor is advised of the lease rules and regulations for Puffton Village.
- We recommend that you have a signed sublet agreement with your sublettor.
- You are responsible for providing your sublettor apartment and laundry keys and keys to your mailbox.
- Your sublettor can pay rent at the Rental Office by check, cash or money order. **Sublettors cannot pay through their TWA account. Their account is not linked to a specific apartment.**

We, the undersigned, hereby request and authorize the subletting of the rights of occupancy presently held by:

**Resident temporarily leaving (please print):**

**Sublettor coming in (please print):**

\_\_\_\_\_

\_\_\_\_\_

under the lease for the premises known as 1040 North Pleasant Street, Unit #\_\_\_\_Amherst, MA 01002 for time period beginning \_\_\_\_\_, and ending \_\_\_\_\_, only.  
mm/dd/yr mm/dd/yr

This sublet does not change, alter or amend any provisions or obligations under the lease, except as contained herein, for any and all of the undersigned or the original Lessee(s). The undersigned specifically acknowledge that all obligations as specified in the lease are joint and several, and may be enforced against any or all of the undersigned, Lessees or their guarantors, or may be enforced against the new occupants of the premises, at the sole option of the Lessor.

Signed as our free act and deed this \_\_\_\_\_ day of \_\_\_\_\_, 202\_.

**Signature of all Tenants on Lease:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Contact Information of Resident Leaving:**

Name: \_\_\_\_\_

Apartment # \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone Number: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Agent**

**Date**