

Proxy Appointment Form

PROXY INFORMATION			
I hereby appoint the following KAUST resident to act as my Proxy.			
Proxy's Name:		Affiliation:	
Telephone Number (mobile):		KAUST ID:	
Email Address:		Unit No.:	
I hereby authorize my appointed Proxy to act on my behalf in my absence in completing the requirements of the Housing Assignment / Bidding Invitation Offer / Departure Inspection.			
RESPONSIBILITIES			
Bidding I agree that my appointed Proxy has my full delegation to inspect, approve and lodge my bidding priority submission. I agree that if I am successful in winning a bid on one of the allocated units, my proxy may sign the Housing Lease Agreement on my behalf. I will then arrange for relocation from my existing unit within 7 days of my signing the agreement. In the event I cannot relocate within 7 days (for example, if I am on leave) I will immediately notify the Housing office and agree a relocation date.			
Housing Assignment I agree that my proxy may sign the Housing Lease Agreement on my behalf. I will then arrange for relocation from my existing unit within 7 days of my signing the agreement. In the event I cannot relocate within 7 days (for example, if I am on leave) I will immediately notify the Housing office and agree a relocation date.			
Departure / Pre-Departure House Inspection I hereby authorize my appointed proxy to act on my behalf in my absence in completing the requirements for house inspection. I agree that my appointed proxy has my full authority to provide access to the team, approve and sign the Inspection Report and handover the keys of my housing unit.			
RESIDENT INFORMATION			
Name:		Affiliation:	
Telephone Number:		KAUST ID:	
E-mail Address:		Unit No.:	
SIGNATURES			
Resident Signature:		Proxy Signature:	
Date:	MM/DD/YYYY	Date:	MM/DD/YYYY

Email form to: housingresident.relations@kaust.edu.sa