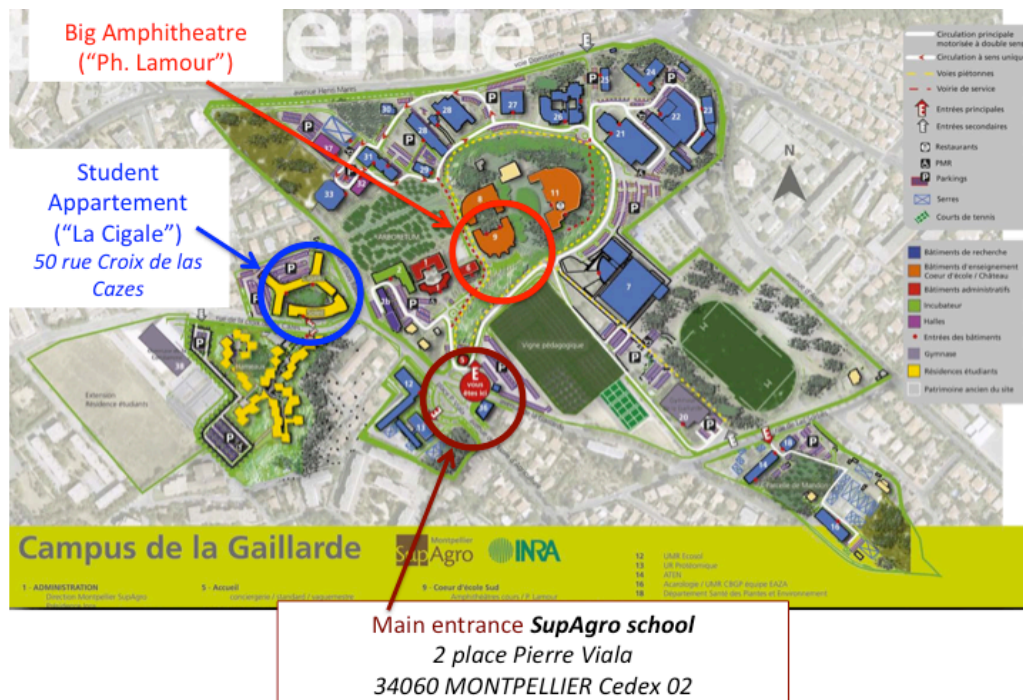


## PhotoMechanics Conference (May 27-29)

APPLICATION TO RENT A STUDETTE (STUDENT APARTMENT)  
**Studette S1 in residence Cigales (~ 12,60 m<sup>2</sup>)**  
 50 rue Croix de las Cazes



Your Name ..... Date of birth.....

Address.....

.....

Telephone number: ..... E-mail.....

1) Check one box for the cost (\*) for a Studette S1 in residence Cigales (~ 12,60 m<sup>2</sup>) :

- **32€ for more than one night**
- **41€ for one night**

(\*)per day, including water, electricity and heating charges; no taxes (TVA) are applied

2) Check one box for the dates of your arrival (only three possibilities):

- **arrival: Saturday May 25<sup>th</sup>, between 7pm to 9pm only**
- **arrival: Sunday May 26<sup>th</sup>, between 6pm to 9pm only**
- **arrival: Monday May 27<sup>th</sup>, between 8am to 11:45am and 2:30pm to 4:30 pm**

3) Check one box for the dates of your arrival (only one possibility):

- **departure: Wed. May 29<sup>th</sup>, between 8am to 11:45am and 2:30pm to 4:30 pm**

**Indicate the price for your stay (number of day\*price per a day) :**  
(no taxes applied)

I own a car : yes  no

If yes , please give the registration/license plate number : .....

During your stay who is the person we should contact if there is an emergency?

(You can indicate the mail of the organization conference [photomechanics2013@univ-montp2.fr](mailto:photomechanics2013@univ-montp2.fr) )

Full name.....

Telephone number..... mobile phone number.....

I agree to:

- Follow the house rules for the residence
- Occupy this studio myself
- Pay the rent in advance
- Insure the studio and provide the insurance documents to this effect on my arrival

Signed (give date and place).....

Please attach the following documents to your application form (incomplete applications will not be accepted):

- A photocopy of your passport or identity card

Please send your application filled and all the documents **before May 1<sup>st</sup>** to : [photomechanics2013@univ-montp2.fr](mailto:photomechanics2013@univ-montp2.fr)

An acknowledge receipt will be sent by e-mail.

### **Paiement information (check one box)**

**During your stay (cash, credit card, cheque)**

**Before your stay (bank transfert, “Bon de Commande”)**

(see accounting information in last page)

### **Rent, facilities and other information**

#### Facilities

##### **a) Studios/Studettes**

- Kitchenette with fridge, electric hob, storage space (cutlery and china not provided),
- Bathroom with shower or bath ( in S building), washbasin and WC
- Bed, mattress, (bedding : sheets, pillows, pillow cases, blankets, duvets etc are not provided)
- Television/internet connections

##### **b) Communal areas**

- 4 washing machines and a tumble dryer are available for use in the basement of the building
- Tenants are responsible for **cleaning the** studio and the fridge
- You will need to bring a desk lamp to stand on the desk – please do not bring one which clips on.

## FORMULAIRE DE CREATION D'UN FOURNISSEUR

**Nom, Prénom, Raison sociale : MONTPELLIER SUPAGRO**

**Forme juridique :**  Société  Etablissement Public - Personne morale  
 Association  Profession libérale  Personne physique

**Activité principale (code APE) : 8542 Z**

**Adresse : N° : 2** ..... Voie : **PLACE VIALA**  
 BP : ..... Code postal : **34060**  
 Ville : **MONTPELLIER CEDEX 2** . Pays : **FRANCE**  
 Téléphone : **04.99.61.24.76**. Fax :  
 e-mail : **residence@supagro.inra.fr**

**Domiciliation bancaire (joindre un RIB):**

Agence - Ville : **TP MONTPELLIER** ..... Code postal : **34000**  
 Code banque : **10071** Code guichet : **34000**  
 N° compte : **00001003995** Clé RIB : **46**  
 N° identifiant IBAN : **FR76 1007 1340 0000 0010 0399,546**  
 N° identifiant BIC/SWIFT : **TRPUFRP1**

**Données complémentaires OBLIGATOIRES : • Sociétés installées en France , Etablissements publics, Administrations :**

N° SIRET (14 chiffres) : **13000279300011**

**• Professions libérales :**

N° SIRET ou N° URSSAF ou N° d'inscription au registre du commerce :

.....  
 N° d'inscription au répertoire des métiers ou N° INSEE : .....

**• Administrations, Etablissements publics, Sociétés de l'U.E. :**

N° identifiant TVA (VAT) : .....

TRESOR PUBLIC

RELEVÉ D'IDENTITÉ BANCAIRE

PARTIE RÉSERVÉE AU DESTINATAIRE DU RELEVÉ

Le relevé ci-contre est destiné à être remis à vos créanciers ou débiteurs, français ou étrangers, appelés à faire inscrire des opérations à votre compte (virements, paiement des quittances etc...)

Identifiant national de compte bancaire - RIB						
Code banque	Code guichet	N° de compte	Clé RIB	Domiciliation		
10071	34000	00001003995	46	TPMONTPELLIER		
Identifiant international de compte bancaire - IBAN						
IBAN (International Bank Account Number)						
<small>2 place Pierre Viala - 34060 MONTPELLIER - TEL. 04 99 61 24 76 - residence@supagro.inra.fr</small>						
FR76	1007	1340	0000	0010	0399	546
BIC (Bank Identifier Code)						TRPUFRP1

TITULAIRE DU COMPTE :

MONTPELLIER SUP AGRO

L'AGENT COMPTABLE