



1. Landlord Contact Information:

(Name)

(Address)

(City, State, Zip Code)

(Day Telephone Number)

(Evening Telephone Number)

(Cell Phone Number)

(Fax Number)

(Email Address)

2. Who should contact the landlord (case manager or client)? _____

3. Apartment Location: _____
(Address, Apartment #)

(City, State, Zip Code)

4. Building Type: 1-4 units _____ 5-20 units _____ 21-40 units _____ 40+ units _____

5. Type of Housing: Individual _____ Family _____ Disabled _____ Other _____

6. Vacany(ies) as of ___/___/_____

Bedroom Size	# of Units Available	Monthly Rent	Date(s) Available

7. Is/are the unit(s) lead-paint free? Yes _____ No _____ Don't Know _____

8. Upfront Costs: Application Fee \$ _____ First Month \$ _____ Last Month \$ _____
Security Deposit \$ _____ Realtor Fee \$ _____

9. Are utilities included? Y _____ N _____ Partial (Please list) _____

10. Parking: Street _____ Off-Street _____ Private _____ None _____



11. Amenities: Air Conditioning_____ Handicap Accessible_____ Refrigerator_____
Dishwasher_____ Storage Space_____ Pets Allowed_____
Eat-In Kitchen_____ Laundry Room/Hookup_____ Yard_____

13. Does the owner have other properties in the area? Y_____ N_____

If yes, where? _____

Comments: _____

