

RENTAL SURVEY

BUILDING NAME: _____ ADDRESS _____ PHONE: _____ CITY, STATE, COUNTY, ZIP: _____	OWNER NAME: _____ ADDRESS _____ PHONE: _____ CITY, STATE, ZIP: _____
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LIST HOW MANY UNITS OF EACH BEDROOM SIZE:

BEDROOMS:	1 _____	2 _____	3 _____	4 _____	5 _____	6 _____	7 _____
SQUARE FT:							
RENT AMOUNT:							

11. Type of House/Apartment

- Single Family Home
 Duplex
 Townhouse
 Manufactured Home
 Apartment (Garden/Walkup)
 Apartment (Elevator/High-Rise)

12. If this unit is subsidized, indicate type of subsidy:

- Section 202
 Section 221(d)(3)(BMIR)
 Section 236 (Insured or noninsured)
 Section 515 Rural Development
 Home
 Tax Credit
 Other (Describe Other Subsidy, including any State or Local Subsidy) _____

13. Utilities and Appliances

The owner shall provide or pay for the utilities and appliances indicated below by an "O". The tenant shall provide or pay for the utilities and appliances indicated below by a "T". Unless otherwise specified below, the owner shall pay for all utilities and appliances provided by the owner.

Item	Specify fuel type	Provided by: Circle	Paid by: Circle
Heating	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Bottle Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Coal or Other	O / T	O / T
Cooking	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Bottle Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Coal or Other	O / T	O / T
Water Heating	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Bottle Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Coal or Other	O / T	O / T
Other Electric (Lights and Appliances)		O / T	O / T
Water		O / T	O / T
Sewer		O / T	O / T
Trash Collection		O / T	O / T
Air Conditioning (Available as either wall/window unit or central air)		O / T	O / T
Refrigerator (Indicate who owns/maintains the appliance)		O / T	
Range/Microwave (Indicate who owns/maintains the appliance)		O / T	
Other (specify)		O / T	O / T

14. Amenities

- Refrigerator
 Dishwasher
 Washer/Dryer (In Unit)
 Cable Provided
 Fireplace
 Pool
 Owner Provides all Utilities
 Range
 Garbage Disposal
 Community Laundry Room
 Wi-Fi Provided
 Patio/Deck
 Parking
 Garage \$ _____ (cost)

ACCESSIBILITY:

- Bus Stop _____
 School _____
 Shopping _____
- Mobility Accessible Units
 Hearing Accessible
 Vision Accessible
 Wheel Chair Accessible