Date: $\qquad$
LANDLORD:
PHONE\#: $\qquad$
UNIT ADDRESS: $\qquad$
\# OF BEDROOMS: $\qquad$ REQUESTED RENT: $\qquad$ DEPOSIT: $\qquad$

Accesibility Features= modified for $\square$ mobility $\square$ hearing impaired $\square$ sight impaired Type of Building $=\square$ single family $\square$ high-rise $\square$ garden/walk-up $\square$ duplex $\square$ townhouse

Utility information: pd by owner paid by tenant


Property features: $\square$ off street parking $\square$ garage $\square$ security system $\square$ laundry on-site $\square$ playground $\square$ air conditioning $\square$ carpeting $\square$ basement $\square$ pets allowed?

Notice-The Office of Assisted Housing is providing this information regarding this rental address as a courtesy to landlords interested in participating in the Section 8 program. This office takes no responsibility as to the condition of the unit or it's availability. this unit has not yet been inspection by a housing coordinator, and may or may NOT have passed a city inspection. all units are inspected prior to move in, and has to pass inpecton before a tenant can move in to that unit.

