

Rent Survey (Currently on Section 8)

Tenant Name:

Unit Address: _____

Date: _____

No. Bedrooms: _____ Square Feet: _____

Rent: _____

No. Bathrooms: _____ 1/2 _____ 3/4 _____ Full

Date Built: _____

Manager/Owner: _____

Phone: _____

Address: _____

Please check off below the items that most closely describe your unit(s)

Year Built

- Year Built - Building is 1 to 10 years old
- Year Built - Building is 21 to 50 years old

- Year Built - Building is 11 to 20 years old
- Year Built - Building is over 50 years old

Amenities

- Exterior Maintenance - Provided
- Recreation Area - On Site

- Laundry Center - On Site
- Security Access - On Site

Area Amenities

- Groceries - Within 2 blocks
- Public Transportation - Within 2 blocks

- Playground - Within 2 blocks

Bedroom Size

- Bedroom Size - 0 Bedroom
- Bedroom Size - 2 Bedroom
- Bedroom Size - 4 Bedroom
- Bedroom Size - 6 Bedroom

- Bedroom Size - 1 Bedroom
- Bedroom Size - 3 Bedroom
- Bedroom Size - 5 Bedroom

Structure Type

- Structure Type - Hi-Rise w/Elevator
- Structure Type - Manufactured Home
- Structure Type - Semi-Detached/Duplex

- Structure Type - Low Rise
- Structure Type - Rowhouse/Townhouse
- Structure Type - Single-Detached

Unit Features

- Air Conditioning - Air Conditioning Unit
- Clothes Washer - Hookup installed
- Dishwasher - Equipped with Dishwasher
- Handicap Accessible - Accessible
- Stove - Stove/Range provided

- Clothes Dryer - Hookup installed
- Deck/Patio - Deck/Patio feature
- Garage - Garage
- Refrigerator - Refrigerator provided

Owner Paid Utilities

- All Utilities Included - Utilities Included
- Electricity - Owner-paid
- Gas - Owner-paid
- Sewer - Owner-paid
- Trash - Owner-paid
- Water - Owner-paid

- All Utilities Not Included - Not Included
- Electricity - Resident-paid
- Gas - Resident-paid
- Sewer - Resident-paid
- Trash - Resident-paid
- Water - Resident-paid

Rent Survey (units NOT currently on Section 8)

Unit Address: _____

Date: _____

Rent: _____

No. Bedrooms: _____ Square Feet: _____

Date Built: _____

No. Bathrooms: _____ 1/2 _____ 3/4 _____ Full

Phone: _____

Manager/Owner: _____

Address: _____

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 Water - Resident-paid