

**VACANT APARTMENT LISTING**

Date: \_\_\_\_\_

Unit Address: \_\_\_\_\_

\_\_\_\_\_

Type of unit: \_\_\_\_\_

Number of Bedrooms \_\_\_\_\_

Number of Bathrooms \_\_\_\_\_

Asking Amount \$ \_\_\_\_\_

**Is the rent negotiable?** \_\_\_\_\_ **Yes** \_\_\_\_\_ **No**

What is the most recent rent charged for comparable assisted/unassisted units within the premises or elsewhere? \_\_\_\_\_

Security Deposit \$ \_\_\_\_\_

Information on apartment:

Date Available: \_\_\_\_\_

Handicap Accessible  Yes  No

Carpet  Tile  A/C Wall Unit  Central Air Tile  Hardwood Floors

Appliances: All  None  Stove  Refrigerator  Dishwasher

Heating Type: Gas  Oil  Electric

Does this unit include utilities? Yes  No

If yes, which one? Heat  Hot Water  Electricity  Cooking

Coin Laundry on Premises:  Yes  No

Washer  Dryer  Washer/Dryer Hookup:  Yes  No

Garage  Fenced in Yard  Private Parking  Off Street Parking

Pets: Yes  No

Contact Person(s) Name: \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Home  Work  Cell

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**WE RESERVE THE RIGHT NOT TO LIST UNITS THAT CANNOT BE APPROVED  
WITHIN THE PROGRAM GUIDELINES.**