# **Proposed Rental Unit Information**

Please complete the form below so that can calculate the cost of the unit for our participant. Thank you!!

**Unit address:**

|  |  |  |
| --- | --- | --- |
| **Unit Type** | **# of Bedrooms** | **Year Built or Last Renovated**For Lead-based Paint purposes |
| [ ]  Apartment[ ]  Duplex/Triplex/Townhome[ ]  House/Modular[ ]  Mobile Home (single-/double-wide) |  |  |
| **Proposed Rent Amount** | **Security Deposit Amount** |
| $ | $ |
| **Utilities & Appliances:** (Check one option for each) |
| Heating | [ ] Gas [ ]  Electric [ ]  Other (explain): |
| Cooking | [ ] Gas [ ]  Electric [ ]  Other (explain): |
| Water Heating | [ ] Gas [ ]  Electric [ ]  Other (explain): |
| Electricity | [ ]  Tenant Pays Utility Company[ ]  Tenant Pays Landlord [ ]  Included in Rent, no separate charge | Refrigerator | [ ]  Tenant must provide[ ]  Provided by Landlord  |
| Gas | [ ]  Tenant Pays Utility Company[ ]  Tenant Pays Landlord [ ]  Included in Rent, no separate charge | Stove/range | [ ]  Tenant must provide[ ]  Provided by Landlord  |
| Water/Sewer | [ ]  Tenant Pays Utility Company[ ]  Tenant Pays Landlord [ ]  Included in Rent, no separate charge | Air Conditioning | [ ]  Tenant must provide[ ]  Provided by Landlord  |
| Trash | [ ]  Tenant Pays Utility Company[ ]  Tenant Pays Landlord [ ]  Included in Rent, no separate charge | Cable/Internet | [ ]  Tenant must provide[ ]  Provided by Landlord |

What date is the unit available for inspection? *(must be turned/ready for move-in)* ­

Landlord/Mgmt Co Name: Phone #:

Signature: