

**** LANDLORD PLEASE ANSWER ALL QUESTIONS ON THIS FORM****

**NEW TENANT
LANDLORD QUESTIONNAIRE
FOR WORKSHEET**

Date _____

Tenant Name _____ Tenant Phone _____

New Unit Type: Single Family _____ Apt. _____ Twnh. / Duplex _____

Complex Name _____

Rental Unit Address _____ City _____ Zip Code _____

Year Built _____ Unit Sq Ft. _____ Date of Recent Remodeling _____

Security Deposit _____ Rent _____ Tenant Vouchers Size _____

Number of Bedrooms _____ Number Bathrooms _____

UTILITY	PAID OR PROVIDE BY:		FUEL SOURCE		
	OWNER	TENANT	GAS	ELECTRIC	OIL
HEAT					
ELECTRIC					
COOKING					
HOT WATER					
A/C					
STOVE					
WATER/SEWER					
REFRIGERATOR					

UNIT AMENITIES PROVIDED BY OWNER	YES	NO
CENTRAL AIR		
WINDOW A/C UNITS		
CARPETING		
DISHWASHER		
GARABAGE DISPOSAL		
WASHER		
DRYER		
WASHER / DRYER HOOK-UP		
BALCONY		
PATIO		
PRIVATE FENCED YARD		

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BULIDING FACILITIES	YES	NO
BASEMENT		
COVERED/GARAGE PARKING		
OFF-STREET PARKING		
STORAGE OUTSIDE THE UNIT		
DAY CARE		
LAUNDRY FACILITY		
ON SITE PLAY GROUND		
POOL		
COMMUNITY ROOM		
OTHER		

MANAGEMENT AND MAINTENCE SERVICES	YES	NO
ON-SITE MANAGEMENT		
DESK SERVICE		
ON-SITE MAINTENCE STAFF		

HANDICAP UNIT	YES	NO
HANDICAP ACCESSIBLE		
WHEELCHAIR ACCESSIBLE		

Landlord Name _____
 Landlord Address _____ City _____
 State _____ Landlord Phone # _____