

Free Property Listing!

Please print legibly and fill out completely

Owner First Name:	Last Name:	ast Name:		Date Property Is Available:	
Contact Number:	Alternate Numb	er:		-	
Address:		Street Suffix:		Apt #:	
(Circle one) Upstairs Unit or Downstairs Unit?	City:		ZIP Code:		
Number of Bedrooms:	Number of Bath	rooms:			
Monthly Rent Desired:	Security Deposit:		_ (Circle one) Is Deposit Negotiable? Yes or No		
Building Type (apartment, house, duplex, etc.): _			_ Year Buil	t:	
(Circle one) Is the Heating Type Gas or Electric?	? (Circle o	one) Is the Water	Heater Gas or El	lectric?	
(Circle all that apply) Appliances Included: Se	tove (gas or electric)	Refrigerator	Dishwasher	Microwave	
Comments:					