



RENTAL PROPERTY LISTING

Property Address: _____

Today's Date: _____ **Date Available:** _____

Single Family House Duplex/Townhouse Mobile Home Apartment

Proposed Monthly Rent \$ _____ **Security Deposit:** \$ _____ **Are Pets Allowed?** Yes No

How many bedrooms? _____ **How many bathrooms?** _____ Gas & Electric or All Electric

Heating & Cooling: Central Heat/Air Window A/C Space Heaters

Does the home have: Dining Room Bonus Room Fireplace Front Porch Patio

Kitchen Appliances Included: Stove Refrigerator Microwave Dishwasher

Does the home have: Washer Dryer Hookups No Hookups

Flooring: Carpet Hardwood Ceramic Tile Vinyl Flooring

Outdoor Elements: Off Street Parking Garage Car Port Storage Shed Fence

Fine Points of this Home: _____

Contact Name: _____ **Email:** _____

Phone Number(s): _____

Would you like your email address in your listing? Yes No

Your signature and a copy of your photo ID are required.

I certify under penalty of perjury that I am authorized to enter into a legally binding contract for the above property.

This form can be returned to the Housing Authority by mail, fax or email to lknight@savannahpha.com. Listings are published on the 1st and 15th of each month.