



When completed, save this file to your computer and email it to [edenlandlordinfo@edencle.org](mailto:edenlandlordinfo@edencle.org)



### PROPERTY LISTING FORM

Please print clearly and complete this form in its entirety.

<b><u>PROPERTY OWNER/MANAGER INFORMATION</u></b>			<b><u>PROPERTY LOCATION</u></b>														
Contact Name: _____			Address: _____ Unit # _____														
Company Name: _____			City/State/Zip: _____														
Email: _____			County: _____														
Primary Phone: _____			Date Available: _____														
Alternate Phone: _____			*Permission to share your email with participants? <input type="checkbox"/> Yes <input type="checkbox"/> No														
<b>Asking Rent</b> \$ _____ <input type="checkbox"/> Negotiable	<b>Security Deposit</b> \$ _____ <input type="checkbox"/> Negotiable	Bedrooms: _____ Full Baths: _____ ½ Baths: _____	<b>Square Footage</b>	<b>Year Built</b>	<b>Pets Allowed</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Dogs <input type="checkbox"/> Cats												
<b>Property Type:</b> <input type="checkbox"/> Single-Family <input type="checkbox"/> Double/Duplex <input type="checkbox"/> Triplex <input type="checkbox"/> 4plex <input type="checkbox"/> Walk-up <input type="checkbox"/> High-rise <input type="checkbox"/> Mobile Home																	
<b>Indoor:</b> <input type="checkbox"/> Furnished <input type="checkbox"/> Ceiling Fans <input type="checkbox"/> Fireplace <input type="checkbox"/> Security System		<b>Outdoor:</b> <input type="checkbox"/> Fenced Yard <input type="checkbox"/> Swimming Pool <input type="checkbox"/> Gated Community <input type="checkbox"/> Lawn Care Included <input type="checkbox"/> Trash Removal Included		<b>Parking:</b> <input type="checkbox"/> 1 Car Carport <input type="checkbox"/> Unassigned <input type="checkbox"/> 2 Car Carport <input type="checkbox"/> Assigned <input type="checkbox"/> 1 Car Garage <input type="checkbox"/> Driveway <input type="checkbox"/> 2 Car Garage <input type="checkbox"/> Street <input type="checkbox"/> 3 Car Garage <input type="checkbox"/> None													
<b>Laundry Type/Present:</b>																	
<table style="width:100%; border: none;"> <tr> <td style="width: 60%;"></td> <td style="width: 20%; text-align: center;">In Unit</td> <td style="width: 20%; text-align: center;">Basement</td> </tr> <tr> <td>Washer</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Dryer</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>W/D Hook Ups</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>							In Unit	Basement	Washer	<input type="checkbox"/>	<input type="checkbox"/>	Dryer	<input type="checkbox"/>	<input type="checkbox"/>	W/D Hook Ups	<input type="checkbox"/>	<input type="checkbox"/>
	In Unit	Basement															
Washer	<input type="checkbox"/>	<input type="checkbox"/>															
Dryer	<input type="checkbox"/>	<input type="checkbox"/>															
W/D Hook Ups	<input type="checkbox"/>	<input type="checkbox"/>															
<b>APPLIANCES INCLUDED</b>		<b>TYPES OF UTILITIES</b>		<b>UTILITIES PAID BY</b>													
<input type="checkbox"/> Dishwasher <input type="checkbox"/> Stove <input type="checkbox"/> Refrigerator <input type="checkbox"/> Microwave <input type="checkbox"/> Garbage Disposal  <b>Other amenities</b> (e.g., community, fitness, party rooms): _____ _____ _____ _____ _____ _____	<b>Heating Type</b> <input type="checkbox"/> Baseboard <input type="checkbox"/> Furnace <input type="checkbox"/> Heat Pump <input type="checkbox"/> Boiler <input type="checkbox"/> Radiator  <b>Heating Fuel</b> <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Propane  <b>Stove Type</b> <input type="checkbox"/> Gas <input type="checkbox"/> Electric	<b>Water Type</b> <input type="checkbox"/> City Water <input type="checkbox"/> Well Water  <b>Sewer Type</b> <input type="checkbox"/> Public Sewer <input type="checkbox"/> Septic Tank  <b>Hot Water Type</b> <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Propane  <b>Cooling Type</b> <input type="checkbox"/> Central <input type="checkbox"/> Window/Wall Unit <input type="checkbox"/> None	<b>Gas</b> <input type="checkbox"/> Tenant <input type="checkbox"/> Owner  <b>Electric</b> <input type="checkbox"/> Tenant <input type="checkbox"/> Owner  <b>Water</b> <input type="checkbox"/> Tenant <input type="checkbox"/> Owner	<b>Sewer</b> <input type="checkbox"/> Tenant <input type="checkbox"/> Owner  <b>Trash</b> <input type="checkbox"/> Tenant <input type="checkbox"/> Owner  <b>Internet</b> <input type="checkbox"/> Tenant <input type="checkbox"/> Owner													
<b>Recent renovations/features:</b> _____ _____ _____ _____ _____ _____	<b>Other:</b> <input type="checkbox"/> ADA accessible unit <input type="checkbox"/> Age Restrictions (55/60 years of age & older) <input type="checkbox"/> Pest Control Included _____ _____ _____	<b>Will you accept participants with:</b> <input type="checkbox"/> No rental history <input type="checkbox"/> Previous evictions <input type="checkbox"/> Poor credit history <input type="checkbox"/> No credit history <input type="checkbox"/> Bankruptcies <input type="checkbox"/> Felonies <input type="checkbox"/> Sex offenses	<b>* Will you accept:</b> <input type="checkbox"/> Participants in short-term programs <input type="checkbox"/> Participants in long-term programs  <b>Have you rented to an EDEN participant in the past?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If so, year(s) _____														

\* Please visit the "List Your Properties with EDEN" section of our website for more details about our programs @ [www.edencle.org/owners](http://www.edencle.org/owners)