

RFTA SUPPLEMENTAL

LIST OF UNIT AMENITIES

CLIENT NAME: _____

CLIENT #: _____

Rental Property Address (including zip code):

Year Built _____

Square Feet _____

Map Grid _____

Census Tract _____

OWNER PROVIDED AMENITIES (Check each one provide by the Owner)

<input type="checkbox"/>	Dishwasher	<input type="checkbox"/>	Ceiling Fans
<input type="checkbox"/>	Central Air	<input type="checkbox"/>	Garbage Disposal
<input type="checkbox"/>	Covered Parking	<input type="checkbox"/>	Garage
<input type="checkbox"/>	Window Air	<input type="checkbox"/>	Washer/Dryer Hookups
<input type="checkbox"/>	Laundry Facilities	<input type="checkbox"/>	Working Fireplace
<input type="checkbox"/>	Carpeting	<input type="checkbox"/>	ENERGY Efficient Certified Unit
<input type="checkbox"/>	Refrigerator	<input type="checkbox"/>	Accessible to the Disabled
<input type="checkbox"/>	Range	<input type="checkbox"/>	Unit Cable Ready
<input type="checkbox"/>	Microwave	<input type="checkbox"/>	Security System
<input type="checkbox"/>	Additional Bathrooms	<input type="checkbox"/>	Modern Appliances
<input type="checkbox"/>	Family room	<input type="checkbox"/>	Bonus room(s)
<input type="checkbox"/>	Other: (list:ex: pool; spa)		
<input type="checkbox"/>	Landlord Provides Additional Services (Circle): Gardening, Pool/Spa Maintenance, Alarm Service, Meals, Transportation, Business Center, Concierge, Learning Center, Social Services, etc., <u>available on site.</u>		
<input type="checkbox"/>	NO Services	<input type="checkbox"/>	
<input type="checkbox"/>	Owner Provides ON SITE maintenance		
<input type="checkbox"/>	Owner Provides OFF SITE maintenance		
<input type="checkbox"/>	Poor Maintenance		

Verified by: _____

Date: _____

Name of person completing form