



CHATTANOOGA HOUSING AUTHORITY HOUSING CHOICE VOUCHER PROGRAM

NEW PROPERTY LISTING

PROPERTY OWNER: _____

CONTACT TELEPHONE # _____

EMAIL ADDRESS: _____

LISTING ADDRESS FOR RENT: _____

LOCATION / AREA: _____

NUMBER OF BEDROOMS: _____ **NUMBER OF BATHS:** _____

TYPE OF HOUSING: SINGLE HOUSE <input type="checkbox"/> DUPLEX <input type="checkbox"/> APART. <input type="checkbox"/> MANUF. HOME <input type="checkbox"/>			
UTILITY INFORMATION (CHECK THE ONE THAT APPLIES)			PROVIDED BY:
HEATING	GAS <input type="checkbox"/>	ELECTRIC <input type="checkbox"/>	OWNER <input type="checkbox"/> TENANT <input type="checkbox"/>
COOKING	GAS <input type="checkbox"/>	ELECTRIC <input type="checkbox"/>	OWNER <input type="checkbox"/> TENANT <input type="checkbox"/>
AIR	N/A <input type="checkbox"/>	N/A <input type="checkbox"/>	OWNER <input type="checkbox"/> TENANT <input type="checkbox"/>
WATER HEATING	GAS <input type="checkbox"/>	ELECTRIC <input type="checkbox"/>	OWNER <input type="checkbox"/> TENANT <input type="checkbox"/>
WATER	N/A <input type="checkbox"/>	N/A <input type="checkbox"/>	OWNER <input type="checkbox"/> TENANT <input type="checkbox"/>
SEWER	N/A <input type="checkbox"/>	N/A <input type="checkbox"/>	OWNER <input type="checkbox"/> TENANT <input type="checkbox"/>
APPLIANCE INFORMATION: (CHECK THE ONE THAT APPLIES)			PROVIDED BY:
STOVE	N/A <input type="checkbox"/>	N/A <input type="checkbox"/>	OWNER <input type="checkbox"/> TENANT <input type="checkbox"/>
REFRIGERATOR	N/A <input type="checkbox"/>	N/A <input type="checkbox"/>	OWNER <input type="checkbox"/> TENANT <input type="checkbox"/>

RENT REQUESTED: _____ \$

SECURITY DEPOSIT REQUIRED : _____ \$

PETS ALLOWED: YES NO