

Apartment Search Checklist

Name of Building/Apartment: _____

Address: _____

Phone Number: _____

Hours of Operation: _____

Name/position of person you spoke with: _____

Date of Visit: _____

Income limit	Age limit	Wait List Period	
\$	None ___ Years	Now	3 months 6 months More

Pets	Smoking	Parking	Handicap Accessible
Yes No	Yes No	Yes No	Yes No

Rent	Utilities	Security
Preset \$	Included Not Included	Yes No
Portion of income		

Bedrooms	Bathing	Elevators	Balcony	Storage
1 2	Shower Tub	1 2	Yes No	Yes No

Notes: _____

Date Application Sent: _____

When you tour the building, keep track of your impressions with this list.

Check the choice that best describes your opinion in each category.

Windows / lighting	Good	Fair	Poor
Apartment's space / size	Good	Fair	Poor
Building's condition	Good	Fair	Poor
Building's cleanliness	Good	Fair	Poor
Closets, cupboards, counters	Good	Fair	Poor
Bathroom	Good	Fair	Poor
Laundry	Good	Fair	Poor
Transportation	Good	Fair	Poor
Close to stores	Good	Fair	Poor
Activities on site	Good	Fair	Poor

Notes: _____

Important:

*When you mail in an application, be sure to **call back to the building manager** and check on the status of your application.*

It is your responsibility to make sure the application was received and to follow the progress of your application.

*Also, be sure to **make a copy of your application** before mailing it.*