THE HOUSING AUTHORITY OF PRINCE GEORGE'S COUNTY

RUSHERN L. BAKER III
County Executive

ERIC C. BROWN
Executive Director

Unit Availability Form

Date Listed: ____/____/____ Date Available to Rent: ____/____/____

Unit Address: _____
Number Street Apt or Suite

City/State/Zip: _____
City State Zip

Contact Name: _____

Phone: _____
(List one number you want potential tenants to call.)

Unit Type: (check one)
☐ Apartment ☐ Townhouse ☐ Single Family Home
☐ End Unit
☐ Middle Unit

Year Built: _____ # of Bedrooms: _____ Rent: _____

Handicap Accessible? ☐ Yes ☐ No

Utilities: **(Check *only* those that are included in rent)**

Heat ☐ Trash ☐ Water ☐ Electricity ☐

Type of heat: Oil ☐ Gas ☐ Electric ☐

IMPORTANT: Please complete all spaces. Failure to do so will delay getting your property listed.

****Units will be removed from register if not rented within three months, unless updated by contact.****

***** INSPECTIONS ARE ONLY DONE ONCE A CLIENT HAS BEEN CHOSEN!!!**

*****DO NOT TURN IN YOUR RENTER'S LICENSE OR DIRECT DEPOSIT FORMS UNTIL AFTER YOU HAVE CHOSEN A CLIENT.*****

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