Pulaski County

Residential Single Family Rental Questionnaire

CONFIDENTIAL INFORMATION

Owner:	Phone:				
	Parcel ID:				
Mailing Address:					
Property Address:					
	UTILITIES P	AID (Circle One) Monthly Average if paid by landlord			
Monthly Rent	Water	Tenant/Landlord			
Months Vacant	Gas	Tenant/Landlord			
Number of Bedrooms	Electric	Tenant/Landlord			
Number of Bathrooms					
Parking (Check one)	Appliance F	Appliance Provided (Check all that apply)			
_Garage	_Stone				
_Off Street	_Refrigerate	or			
_On Street	_Washer/D	ryer			
Answer Yes or No					
 Rented to a family me Property is rent to ow 		d?			
• •	•	one is not already on file with our office. Per IC 6-1.1-35-9 expense is constitutionally protected and will remain			
Lorena H. (Holly) Van Der Aa Pulaski County Assessor 112 E Main St., Room 300 Winamac, IN 46996					
574-946-3845					
574-946-7648 (fax)	and the account of the le				
Email: pulaskiassessor@pula	askicounty.in.g	<u>30V</u>			
Printed name:					
Signature:		Date:			

Pulaski County

Residential Multi-Unit Rental Questionnaire ***CONFIDENTIAL INFORMATION***

Owner:			Phone:			
Email:	Parcel ID:					
Mailing Addres	ss:					
Property Addre	ess:					
**A copy of th	e current lease is red	quested if one is not alre	on page 2 or attach more pages as need ady on file with our office. Per IC 6-1.1-3 estitutionally protected and will remain			
Monthly Rent Months Vacan	it		Bedrooms			
Utilities paid Water Gas Electric	Tenant/Landlord Tenant/Landlord Tenant/Landlord	enthly Average if paid by	landlord Appliances Provided (Apply) Stove Refrigerator Washer/Dryer)		
Check all that This unit is	apply rented to a family me	ember or friend 1	his unit is the owner's primary residence	5		
Unit 2 Unit Type (Che Monthly Rent Months Vacan Parking (Check	it	flain _Upper _Lower/Bas Number of Number of _ Off Street _ Of	Bedrooms			
Utilities paid Water Gas Electric Check all that	Tenant/Landlord Tenant/Landlord Tenant/Landlord	enthly Average if paid by	landlord Appliances Provided (Apply) Stove Refrigerator Washer/Dryer)		
This unit is	rented to a family me	ember or friend T	his unit is the owner's primary residence	2		

Unit 3				
Unit Type (Che	ck all that apply): _M	ain _Upper _Lowe	er/Basement _Fr	ront _Rear _Side by Side
Monthly Rent		_ Numb	er of Bedrooms	
Months Vacan	t	_ Numb	er of Bedrooms	
Parking (Check	one): _ Garage	_ Off Street	_ On Street	
Utilities paid	(Circle One) Mor	nthly Average if pa	aid by landlord	Appliances Provided (Apply)
Water	Tenant/Landlord			Stove
Gas	Tenant/Landlord			Refrigerator
Electric	Tenant/Landlord			Washer/Dryer
Check all that a	apply			
This unit is r	ented to a family mer	nber or friend	This unit is	the owner's primary residence
Unit 4				
	ck all that apply): Ma	ain Upper Lowe	er/Basement Fr	ront _Rear _Side by Side
Monthly Rent	on an onac app.///		er of Bedrooms	
Months Vacan	t	_	er of Bedrooms	
Parking (Check	one): _ Garage	_ Off Street	_ On Street	
Utilities paid	(Circle One) Mor	nthly Average if pa	nid by landlord	Appliances Provided (Apply)
Water	Tenant/Landlord			Stove
Gas	Tenant/Landlord			Refrigerator
Electric	Tenant/Landlord			Washer/Dryer
Check all that a	apply			
This unit is r	ented to a family mer	mber or friend	This unit is	the owner's primary residence
*Attach more	pages as needed			
	lly") Van Der Aa			
Pulaski County	Assessor			
112 E Main St.,	Room 300			
Winamac, IN 4	6996			
574-946-3845				
574-946-7648	(Fax)			
Printed Name:				
Signature:				Date: