



### RENTAL UNIT LISTING REQUEST

Address of unit: \_\_\_\_\_ Unit No \_\_\_\_\_, Richmond

**CONTACT INFORMATION:**

Name \_\_\_\_\_ ( ) Owner ( ) Property Mgmt. Company ( ) Other

Phone \_\_\_\_\_ Email \_\_\_\_\_

Date Unit available for Inspection: \_\_\_\_\_

Rent Request: \$ \_\_\_\_\_ Security Deposit: \$ \_\_\_\_\_

**UNIT INFORMATION:**

**Housing Type:** ( ) Single Family/House ( ) Condo ( ) Duplex ( ) Tri or four-plex ( ) 5+ units

**Bedrooms:** \_\_\_\_ **Baths:** \_\_\_\_ **Other:** \_\_\_\_\_

**Features:** ( ) Wheelchair accessible ( ) Alarm/security system ( ) Private Storage  
( ) Gym ( ) Pool ( ) Guard/Security ( ) Controlled entry to property

**Laundry** ( ) Hook-up ( ) Coin laundry ( ) Washer/dryer in unit

**Parking** ( ) Garage ( ) Carport ( ) Off-Street stall/lot

**Pets** ( ) No pets allowed ( ) 1 house pet (cat or dog) ( ) Service animals only ( ) \_\_\_\_\_

**Appliances:** ( ) Stove ( ) Refrigerator ( ) Dishwasher ( ) Disposal ( ) Compactor

**UTILITIES** (Enter "T" for Tenant paid; "O" for owner paid

\_\_\_ Gas \_\_\_ Electricity \_\_\_ Water \_\_\_ Garbage [Must have separate meter if paid by tenant]

**APPLICATION PROCESS:** Enter "Y" for Yes or "N" for No:

( ) Application required ( ) Application fee \$ \_\_\_\_\_ ( ) Non-refundable ( ) Refundable

( ) Credit Check required \$ \_\_\_\_\_ ( ) No

Please sign, date below and submit to RHA: [Admin@rhaca.org](mailto:Admin@rhaca.org) or fax (510) 237-5230

Submitted by: \_\_\_\_\_ Date \_\_\_\_\_

**NOTE:** The unit listing report is updated every Tuesday; new entries must be received by 12:00 p.m. Friday. Entries will be removed after 30-days.