



PROPERTY LISTING FORM

Contact Person _____

Telephone Number _____ Fax Number _____

Number of bedrooms _____

Number of bathrooms _____

Property Address: _____

Appliances included in the unit (provided by Owner). Please check all that apply.

Washer Dryer Refrigerator Range

Microwave Dishwasher Garbage Disposal

Amenities. Please check all that apply.

Swimming Pool Central Air Conditioning Carport

Garage (#cars) Jacuzzi Screened Lanai/Deck

Family Room Porch Other _____

What type of power does the unit require? (Please check all that apply)

Electric Gas Oil

Comments: _____

Monthly Rent requested \$ _____

Security Deposit Requested \$ _____

Application Fee required \$ _____

Date Unit Available _____

ATTENTION: LANDLORDS AND AGENTS

This property will remain on the list for 30 days. If you wish to keep the property listed, you will need to submit a new form. Once your unit has been rented, please notify the Panama City Housing Authority by fax.