Eval: _____ _____ **Ref#:** _____
           Name   MM/DD HH:MM   type, XXXXXXXX

Rent: _____ **Bedrooms:** _____ **Total Rooms:**_____ **Move in:**_____
          $ #   #   MM/DD

Inital Cost: _____ + _____ + _____ + _____ = _____
                 $first/last rent $deposit $broker fee $moving costs $

Deposit Return Cond. _____

Address: _____ _____
                          # Street   City, ZIP

Contact: _____ _____ _____ □Agent
                       Name   (XXX)XXX-XXXX   user@domain.org

Parking: _____ _____ □On Street □Off Street □Tandem □Garage
              $ #

Laundry: □Private □Shared _____ □Coin □Laundromat □Hookup?
                                          W&D/Apts

Super: □_____ Owner □_____ Corp. □Manages Other: _____
            Exper./1st-time

Location

___ to Red Line: _____ _____
mi   walking   biking

___ to _____ Line: _____ _____
mi   walking   biking

___ to ___ Bus: _____ _____
mi   #   walking   biking

___ to MIT: _____ _____ _____ _____ _____
mi   walking   biking   bus   MBTA   car

___ to _____: _____ _____ _____ _____ _____
mi   Supermarket   walking   biking   bus   MBTA   car

_____ _____ _____ _____ _____ _____
                              walking   biking   bus   MBTA   car

Noise:_____ _____ _____
                  Traffic   Parties   Other

Crime: □Bike Theft □Vandalism □Other _____

Structure: Bed$_1$_____ Bed$_2$_____ Bed$_3$_____ Bed$_4$_____
                      sq. ft.   sq. ft.   sq. ft.   sq. ft.

Floor:___ **Tot Apts:**___ **Stairways:**_____ □Priv. Entry □Buzz □ICom
          #   #   #,narrow?,twisty?

Living Rm:_____ **Dining Rm:**_____ **Study:**_____ **Foyer:**_____ **Pantry:**_____
             sq. ft.   sq. ft.   sq. ft.   sq. ft.   sq. ft.

Yard:_____ **Patio:**_____ **Porch/Deck:**_____ □Roof □Side □Enclosed
         sq. ft.   sq. ft.   sq. ft.

Windows: □Moves Easily □Insulated □Screens □Storm Windows □Landlord Changes?

            □Cracked? □Venetian Blinds □Traditional Blinds

Storage: _____ □Attic _____ □Basement _____ □Bike Storage _____
              closets   sq. ft.   sq. ft.   sq. ft.

Doors: □Close □Latch □Smooth

Furniture: □Kitchen Table □Basement Workbench □Other _____

Renovations(Recent/Future) _____

Structural Defects/Damage _____

_____

Kitchen: _____ ☐Eat-In ☐Galley
sq. ft.

Appliances: ☐Washer ☐Dryer ☐Garbage Disposal ☐Dishwasher ☐Fridge ☐Microwave

Stove/Oven: ☐Gas ☐Electric   **Rangehood Vents:** ☐inside ☐outside

Countertop: Area: _____ ☐Masonite ☐Granite ☐Marble ☐Wood
sq. ft.

Storage: ____ ____ ____ _____ ☐PotRack ☐DishRack
#S   #M   #L   #Drawers

Floor: ☐Linoleum ☐No-Wax ☐Tile ☐Wood

Vermin: ☐Mice ☐Roaches ☐Ants ☐Termites ☐Other _____

Bathrooms: _____
#

Walls: ☐Wallpaper ☐Tile ☐One-Piece ☐Bathtub ☐Enclosed Shower

Floor: ☐Linoleum ☐No-Wax ☐Tile ☐Wood   **Ventilation:** ☐Vent Fan ☐Window

Shower Pressure: _____ **Time to Hot Water:** _____ **Toilet Flush:** _____
good/bad   seconds   temp change

Heater: ☐Shared _____ _____
gallons   type

Leaks: ☐Basement ☐Roof/Ceiling ☐Walls

Problems: ☐Mold/Mildew ☐Water Stains ☐Peeling Caulk ☐Toilet Issues/Odors ☐Loose Tiles

Utilities

Electrical: _____ _____ Service ☐Fuses ☐Breakers ☐Tenant Accessible?
$avg/mo   amps

Plugs: Bed_1 ___/___ Bed_2 ___/___ Bed_3 ___/___ Bed_4___/___
gnd/nognd   gnd/nognd   gnd/nognd   gnd/nognd

Kitchen___/___ Living Rm___/___ Storage___/___ ☐Tested?
gnd/nognd   gnd/nognd   gnd/nognd

Thermostat: ☐Digital ☐Analog   Heating Fuel: ☐Gas ☐Electric ☐Oil

Heat: _____ ☐Standard Radiator ☐Baseboard Radiator ☐Central Air
$avg/mo

Included: ☐Heat ☐Electric ☐Cold Water ☐Hot Water ☐Gas ☐Net ☐Phone ☐Cable ☐A/C

Available: ☐Net ☐Phone ☐Cable ☐A/C(personal)

Notes: _____

_____

_____