

		/ Description Form		
Address:	State:		_ Unit #	
City:	State:	Zip Code:		
	Square Footage:		Bedroom:	Bathroom:
Building Type:				
	Single Family Detached Garden (1-4 stories)			
Townhouse	Duplex / Row house Condo			
Mobile Home	Handicap Acce	essible		
Unit Condition:				
New construct	ion or completely renova	ated Maintaine	ed/partially rend	ovated Average
Amenities: (Su Indoor:	pplied by owner)			
	Coiling Eans	Washor D	nuor	
	Ceiling Fans Onsite Laundry		vetom	
Kitchen:		Security S	ystern	
	Garbage Dispos	al Microwaye	Refrigera	itor
Stove				
Outdoor:				
	Pool	Gated Community		
	age Covered Space			Open Street
None				
Maintenance:				
	Lawn	Trash		
Air Conditioning/H		_		
Central A/C	Window A/C Space H	leater 0	Other	
la thora a homoow	$\mathbf{r}_{\mathbf{r}} = \mathbf{r}_{\mathbf{r}} + $			
	ners association? (_) Y er on letterhead or notari		no approval is i	required.
				-
	<u>for the utilities and appl</u>			
	ppliances indicated belo			fied below, the
owner shall pay for a	all utilities and appliance	s provided by the o	wner.	
	Paid by:			
Heating		Other Electric		
Cooking		Water		
Water Heating		Sewer		
Garbage		Air Conditioni	ng	
	Provided by:			
Stove		Refrigerator		
Print:	Date:			
Signature:				