

La Porte County / Michigan Township Assessor

Residential Multi-Unit Rental Questionnaire





Owner:	Phone:			
Email:	Parcel ID:			
Owner Mailing A	ddress:			
Property Addres	s:			
* Please comple	te one section per unit. Lis	st additional units on page 2 or attac	h more pages as needed.	
• •	•	if one is not already on file with our otected and will remain confidential.	office. Per IC 6-1.1-35-9, any information pertaining to	
Unit 1				
Unit Type (Che	ck all that apply) : 🗆 M	lain Upper Lower/Basement	□ Front □ Rear □ Side by side □ Townhome	
Monthly Rent	# of Bedrooms	# of Bathrooms	Months Vacant (Since last report)	
Parking (Check	One): Garage O	off Street □ On street		
Utilities Paid	(Circle One)	Monthly Average if paid by landlord.	Appliances Provided (Check all that apply)	
Water	Tenant / Landlord		□ Stove	
Gas	Tenant / Landlord		□ Refrigerator	
Electric	Tenant / Landlord		□ Washer/Dryer	
Check all that a	apply			
	•	r or friend □ This unit is the own tal listed on □ Airbnb □ VRBO □	er's primary residence Other	
Unit 2				
Unit Type (Che	ck all that apply) : 🗆 M	lain □ Upper □ Lower/Basemen	t □ Front □ Rear □ Side by side □ Townhome	
Monthly Rent	# of Bedrooms	# of Bathrooms	Months Vacant (Since last report)	
Parking (Check	One): Garage O	off Street □ On street		
Utilities Paid	(Circle One)	Monthly Average if paid by landlord.	Appliances Provided (Check all that apply)	
Water	Tenant / Landlord		□ Stove	
Gas	Tenant / Landlord		□ Refrigerator	
Electric	Tenant / Landlord		□ Washer/Dryer	
Check all that a	apply			
	•	r or friend □ This unit is the own	•	

Unit 3 Unit Type (Che	ck all that apply): \Box	Main □ Upper □ Lower/Baseme	nt □ Front □ Rear □ Side by side □ Townhome	
Monthly Rent	# of Bedrooms	# of Bathrooms	Months Vacant (Since last report)	
Parking (Check	One): 🗆 Garage 🗆	Off Street □ On street		
Utilities Paid	(Circle One)	Monthly Average if paid by landlord	. Appliances Provided (Check all that apply)	
Water	Tenant / Landlord		□ Stove	
Gas	Tenant / Landlord		□ Refrigerator	
Electric	Tenant / Landlord		□ Washer/Dryer	
Check all that a	apply			
		per or friend	ner's primary residence	
Unit 4 Unit Type (Che	ck all that apply): 🛛	Main □ Upper □ Lower/Baseme	nt □ Front □ Rear □ Side by side □ Townhome	
Monthly Rent	# of Bedrooms	s # of Bathrooms	Months Vacant (Since last report)	
Parking (Check	One): 🗆 Garage 🗆	Off Street □ On street		
Utilities Paid	(Circle One)	Monthly Average if paid by landlord	. Appliances Provided (Check all that apply)	
Water	Tenant / Landlord		□ Stove	
Gas	Tenant / Landlord		□ Refrigerator	
Electric	Tenant / Landlord		□ Washer/Dryer	
Check all that a	apply			
		per or friend □ This unit is the owr ntal listed on □ Airbnb □ VRBO □	ner's primary residence Other	
*Attach mo	re pages as need	ed		
Michael R. Schultz La Porte County Assessor Kimi Fain / Income Valuation Specialist 555 Michigan Ave Suite 103 La Porte, IN 46350 Fax: (219) 326-7084 Phone: (219) 326-6808 Ext. 2437 Email: kfain@laporteco.in.gov		t Rashida 300 Was Michiga Michiga Fax: (21 Phone:	Brent Banic Michigan Township Assessor Rashida Freeman / Deputy Assessor 300 Washington St, Suite 361 Michigan City, IN 46360 Fax: (219) 873-3022 Phone: (219) 874-5611 Ext 7920 Email: rfreeman@laporteco.in.gov	
Printed Name :	·			
Signature :			Date :	