



Residential Multi-Unit Rental Questionnaire

CONFIDENTIAL INFORMATION

Owner: _____ Phone: _____

Email: _____ Parcel ID: _____

Owner Mailing Address: _____

Property Address: _____

* Please complete one section per unit. List additional units on page 2 or attach more pages as needed.

**A copy of the current lease is requested if one is not already on file with our office. Per IC 6-1.1-35-9, any information pertaining to income and expense will remain confidential.

Unit 1

Unit Type (Check all that apply) : Main Upper Lower/Basement 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 apply

This unit is rented to a family member or friend This unit is the owner's primary residence

This unit is a short term/vacation rental listed on... Airbnb VRBO Other _____

Unit 2

Unit Type (Check all that apply) : Main Upper Lower/Basement 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 apply

This unit is rented to a family member or friend This unit is the owner's primary residence

This unit is a short term/vacation rental listed on... Airbnb VRBO Other _____

Unit 3

Unit Type (Check all that apply) : Main Upper Lower/Basement 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 apply

This unit is rented to a family member or friend This unit is the owner's primary residence

This unit is a short term/vacation rental listed on... Airbnb VRBO Other _____

Unit 4

Unit Type (Check all that apply) : Main Upper Lower/Basement 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 apply

This unit is rented to a family member or friend This unit is the owner's primary residence

This unit is a short term/vacation rental listed on... Airbnb VRBO Other _____

***Attach more pages as needed**

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

Brent Banic
Michigan Township Assessor
Samantha Benbow / Commercial/Income Deputy
300 Washington St, Suite 361
Michigan City, IN 46360
Fax: (219) 873-3022
Phone: (219) 874-5611 Ext 7919
Email: sbenbow@laporteco.in.gov

Printed Name : _____

Signature : _____ Date : _____