Landlord Interview Questionnaire

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Parcel Information** | | | | | | | | | | | | | | | | | | | | | |  | | | Project: | | | | | PROJECT # | | | | | | | | | | |
| Business/Landlord Name: | | | DISPLACEE(S) NAME | | | | | | | | | | | | | | | | | |  | | | Code: | | | | CODE | | | | | | | Parcel: | | | PARCEL | | |
| Property Address: | | | ADDRESS IN RIGHT OF WAY | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | |
| Mailing Address | | | DISPLACEE(S) ADDRESS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | |
| Phone | | | DISPLACEE PHONE | | | | | | | | | | | | | | Email | | | | | | | | | DISPLACEE EMAIL | | | | | | | | | | | | | | |
| Alternate Contact Name | | |  | | | | | | | | | | | | | | Alternate Phone | | | | | | | | |  | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Tenant/Property Information** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **Please check one:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Property is for single business | | | | | | Type of business occupying the property | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
| Property is Single Family Residential | | | | | | | | Bedrooms | | | | | |  | | Baths | | | | | | |  | | | | Sq Ft | | | | |  | | | | Acres | | | |  |
| Total Occupants | |  | | | Adults: | | | | | | | Male | | | | | | |  | | | | | | | | | | Female | | | | | | | |  | | | |
| Children: | | Male (note ages) | | | | | | |  | | | | | | | | | | Female (note ages) | | | | | | | | | | | | | |  | | | | | | | |
| Property has multiple units | | | | | | Number and Types of Units | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
|  | **How long has/have the tenant(s) occupied the property?** | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
|  | **What is the monthly rent?** | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **What utilities are NOT included in the rent?** | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **Please provide information regarding the following appliances/ mechanicals/ utilities:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| A/C:  HEAT:  STOVE:  WATER HEATER: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WATER SOFTENER   PROPANE TANK | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WELL  PUBLIC  SEPTIC  SEWER | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Reestablishment Plans** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **Intend to reestablish with the same business?  Yes  No** | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
|  | **What type of zoning is required?** | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **Special utilities required?** | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **Lease terms or contractual obligations?** | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Move Plans** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **What personal property do you have there?** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **Best time of year to move?** | | |  | | | | | | | | | Time needed to complete move? | | | | | | | | | | | | | | | | |  | | | | | | | | | | |
|  | **Likely type of move:** | | | Bids:  No  1  2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **Any special concerns regarding the move?** | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| **Additional Comments or Concerns:** |