

Apartment Search Criteria Form

Full Name *

Email

example@example.com

Cell Phone Number

Desired move in date

Month Day Year

Minimum # of bedrooms desired

Minimum # of bathrooms desired

Do you need assigned parking?

What is the price range you are considering?

\$ per month

Do you have pets?

I have a pet

I don't have a pet

What is your estimated credit score?

Please describe your pet(s), type, size, and breed

List your preferred neighborhoods

Any "must haves" for your apartment?