APPENDIX A: APARTMENT HUNTING CHECKLIST/APARTMENT #1

Apartment Address: ______________________________________________________________________________________

Landlord’s Name and Phone #: ______________________________________________________________________________

Cost
____ Rent: _______ Security deposit: _______
____ What utilities are included? Cost?
____ Is the apartment furnished?

Security
____ Are the door locks adequate?
____ Are there locks on the windows?
____ Are the hallways/outside entrance(s) lit?
____ Is there a buzzer or intercom system?
____ Are there peepholes in the entrance door(s)?
____ Is there an alarm system, security personnel?

Kitchen
____ Is it large enough to eat in?
____ Is the sink scratched, damaged, rusted?
____ Does the faucet work/Is there adequate pressure?
____ Does the sink drain?
____ Is the stove/oven clean?
____ Do the burners and oven work properly?
____ Is there adequate cabinet and countertop space?
____ Is the floor in good condition?
____ Is there a vent fan? Is there a dishwasher?
____ Is there a garbage disposal?
____ Are the refrigerator and freezer large enough?

Heating
____ Can I control the heat?
____ Is the house insulated?
____ Are there storm windows?
____ Are there heat ducts in each room?

General
____ Is there enough parking for all of the tenants in the building? Is there off-street parking?
____ Are there water stains on the ceilings or walls?
____ Can the neighbors hear me?
____ Are there signs of mice or pests?
____ Is there adequate closet space?
____ Has the apartment been freshly painted?
____ Can the mailbox be locked?
____ What is the general condition of the building?
____ Have there been any burglaries or other crimes in the area?
____ What floor level is the apartment on?
____ Is it within walking distance to campus? On a bus line?
____ Are there laundry facilities on the premises?
____ Is it close to a grocery store?

Property Owner
____ Is the property owner generally available?
____ Will she/he respond promptly when repairs and maintenance are needed?
____ What do other tenants think about the property owner?

Bathroom and Plumbing
____ Do the faucets work and have adequate pressure?
____ Is there a shower? Condition?
____ Is there a shower curtain rod?
____ Is there a medicine cabinet? Mirrors/towel racks?
____ Is there a toilet tissue holder
____ Is there good lighting? Is there a vent fan?
____ Are the electrical outlets usable and safe?
____ Does each apartment have its own hot water tank? (10 gallons per person is recommended)

Electrical
____ Are the outlets grounded in each room?
____ Is the circuit breaker or fuse box within easy access?
____ Do all the outlets and light switches work?

Adapted with permission from Orange Housing.
APPENDIX A: APARTMENT HUNTING CHECKLIST/APARTMENT #2

Apartment Address: ____________________________________________________________

Landlord’s Name and Phone #: ________________________________________________

Cost
___ Rent: ________ Security deposit: ________
___ What utilities are included? Cost?
___ Is the apartment furnished?

Security
___ Are the door locks adequate?
___ Are there locks on the windows?
___ Are the hallways/outside entrance(s) lit?
___ Is there a buzzer or intercom system?
___ Are there peepholes in the entrance door(s)?
___ Is there an alarm system, security personnel?

Kitchen
___ Is it large enough to eat in?
___ Is the sink scratched, damaged, rusted?
___ Does the faucet work? Is there adequate pressure?
___ Does the sink drain?
___ Is the stove/oven clean?
___ Do the burners and oven work properly?
___ Is there adequate cabinet and countertop space?
___ Is the floor in good condition?
___ Is there a vent fan? Is there a dishwasher?
___ Is there a garbage disposal?
___ Are the refrigerator and freezer large enough?

Heating
___ Can I control the heat?
___ Is the house insulated?
___ Are there storm windows?
___ Are there heat ducts in each room?

General
___ Is there enough parking for all of the tenants in the building? Is there off-street parking?
___ Are there water stains on the ceilings or walls?
___ Can the neighbors hear me?
___ Are there signs of mice or pests?
___ Is there adequate closet space?
___ Has the apartment been freshly painted?
___ Can the mailbox be locked?
___ What is the general condition of the building?
___ Have there been any burglaries or other crimes in the area?
___ What floor level is the apartment on?
___ Is it within walking distance to campus? On a bus line?
___ Are there laundry facilities on the premises?
___ Is it close to a grocery store?

Property Owner
___ Is the property owner generally available?
___ Will she/he respond promptly when repairs and maintenance are needed?
___ What do other tenants think about the property owner?

Bathroom and Plumbing
___ Do the faucets work and have adequate pressure?
___ Is there a shower? Condition?
___ Is there a shower curtain rod?
___ Is there a medicine cabinet? mirrors/towel racks?
___ Is there a toilet tissue holder
___ Is there good lighting? Is there a vent fan?
___ Are the electrical outlets usable and safe?
___ Does each apartment have its own hot water tank? (10 gallons per person is recommended)

Electrical
___ Are the outlets grounded in each room?
___ Is the circuit breaker or fuse box within easy access?
___ Do all the outlets and light switches work?

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