

**Brown University Auxiliary Housing
2010/2011 Off-Campus Living Survey**

Name: _____ Date: _____

In an effort to assist Brown students in their search for off-campus housing and to provide general rental information, the Auxiliary Housing office has prepared this survey form. The survey data will be compiled and available for viewing by students with current Brown IDs at the office of Auxiliary Housing, Room 137, Wayland House.

**Please complete and return this survey via campus mail to:
Auxiliary Housing, Box 1902**

General Information

Off-Campus Address: _____

Landlord Name: _____

Landlord Address: _____

How many years have you lived off-campus: _____

How long have you lived at your present address? _____

On which floor are your accommodations located? Basement 1st floor 2nd floor 3rd floor Other

Total number of tenants in your living unit: _____

How did you locate your apartment? (circle one)

Brown's Housing Service Website Craig's List Daily Jolt Newspaper Ad
Word of Mouth Other

Financial Information

Length of Lease: _____/months Monthly rent: \$ _____/month

Deposit Required: Y N (Security Deposit / 1st Month's Rent / Last Month's Rent)

Is the cost of utilities included in your rent? Y N

If not, how much do you pay per month for: Gas _____ Heat _____ Electricity _____

Is there an energy escalation or property tax clause in your lease? Y N

Did you sign a lead paint disclaimer as part of your lease? Y N

Were you provided with the EPA lead paint pamphlet? Y N

Services

When you took occupancy, was your accommodations furnished? Y N

Total number of rooms in living unit: _____

This number includes: Bedrooms _____ Bathrooms _____ Kitchen _____ Living Room _____

Are there laundry facilities: Y N If so, are they coin-operated? Y N

Other rooms: _____

Is parking available? Y N If so, is there an additional charge? Y N

Are pets permitted? Y N If so, is there an additional charge? Y N

Nearest grocery store: _____

Nearest laundry facilities: _____

Landlord maintenance: (Excellent / Good / Fair / Poor)

Any unsafe features (i.e. code violations)? _____

Additional comments: _____

(Continued on other side)

Security

Physical building security:	Excellent	Good	Fair	Poor	
Personal sense of safety:	Excellent	Good	Fair	Poor	
Do you live in an area that has a fair number of students?			Y	N	
Does your house have a smoke detector?	Y	N	Fire extinguisher?	Y	N
Did your landlord have the locks re-keyed before you moved in?	Y	N	Not Sure		
Do you have a home security system?	Y	N			

Please comment on safety features of the house/location or unsafe conditions:

Subleasing

Are you permitted to sublet over the summer?	Y	N
Are you, rather than your landlord, obligated to locate subletters?	Y	N
If you have sublet, was it difficult to find individuals?	Y	N
What monthly rent did you charge the subletters? _____		

Additional Comments: _____

Comments

What information would have been helpful during your initial search for off-campus housing?

What advice would you like to pass along to future off-campus residents?

In knowing what you know now, would you choose to live off-campus again? Y N

Please explain: _____

Feel free to use this space to offer any additional advise or comments: _____
