

Legislative Housing Information

Name of Owner: _____

Address of Property: _____

Vicinity of....
nearest main streets: _____

Owner's Telephone #: _____

Other person(s) to contact: _____
(Please include relationship
and phone number) _____

Description: House _____ Apartment _____ Condominium _____ Mobile Home _____

No. of available bedrooms _____ No. of bathrooms _____

Furnished? _____ Including dishes, linens, etc.? _____

Other Amenities _____

Parking? _____

Price per month: \$ _____ Does this include utilities? _____

If so, which ones? _____

If not, how much do utilities run per month in winter? _____

Exclusions: _____

(example: smokers,
pets, children)

Other Information: _____

Please return this form to: **Idaho State Legislature**
Legislative Services Office
P.O. Box 83720
Boise, Id 83720-0054
Email: LSOAdminAsist@lso.idaho.gov
Phone: 208-334-2475

Please call the Legislative Services Office when someone rents your place so we can take it off of our active list