Off-Campus Landlord/Housing Evaluation

The purpose of this evaluation is to aid SUNY Cortland students in their quest for safe, decent and affordable off-campus housing. Since properties offer different amenities, quality of life and afford ability, your input will aid fellow students as they look for a place to live. The more information students have access to regarding off-campus housing, the better the decision they can when choosing an apartment. Please print out and fill-in the survey and bring it to the Campus Activities Office in Room 406 Corey Union. Thank you for your assistance.

Are you an/a: Undergraduate_____ Graduate_____ No. of semesters you have lived off-campus: _____

1. Apartment Address (Street and Apt. No.): _____
2. Landlord's Name: _____
3. Rent per person: Per semester: _____ Per Year_____ Security Deposit:_____
4. Fully furnished?_____ Partially furnished?_____ Unfurnished?_____
5. How many bedrooms are in this apartment/house/unit? _____
6. Did you sign a written lease? YES_____ NO_____ Keep a copy for your records? YES_____ NO_____
7. If you have previously rented, did you get your security deposit back? YES_____ NO_____
   If no, why not? _____ In either event, who was the landlord: _____
8. Whose responsibility is it to remove snow, rake leaves, cut the grass, etc.? Tenant_____ Landlord_____
   Is there a cost attached for any of these services, and if so how much per semester _____ No cost_____
9. Is there a parking fee? Yes_____ Amount per semester_____ No fee_____
10. Are utilities included in your rent? YES_____ NO_____ SOME_____
    Circle the utilities that are included: Electric Heat Water Hot Water Cable Internet
    On average, how much does your unit pay per month for utilities. $_____
11. Are pets allowed? YES_____ NO_____ Any limitations or extra fees attached? YES_____ NO_____
    Please explain any limitation or fees: _____
12. Are a washer and dryer provided on-site? YES_____ NO_____ If yes, Coin operated_____ Free_____
13. Would you recommend this landlord and/or property to another student? YES_____ NO_____
    If no, please explain why not. _____
    _____
14. Additional comments you wish to add:_____
    _____

On the scale given below, please rate each of the following on a one to five ranking, with one being the low end of the scale and five being the highest (most acceptable) end of the scale.

A.	General condition of house/apartment:	1	2	3	4	5
B.	Overall exterior condition (driveway, yard, building)	1	2	3	4	5
C.	Overall interior condition (walls, floors, fixtures)	1	2	3	4	5
D.	Condition of furniture and appliances	1	2	3	4	5
E.	Timely responsiveness of landlord (maintenance, repairs, rent)	1	2	3	4	5
F.	Consideration of tenant privacy by landlord	1	2	3	4	5
G.	Appropriate security (locks, lighting, smoke detectors)	1	2	3	4	5
H.	Appropriate ventilation (screens, working windows)	1	2	3	4	5
I.	Appropriate water pressure and/or quantity of hot water	1	2	3	4	5
J.	Appropriate heat	1	2	3	4	5
K.	Appropriate instructions provided regarding trash/recycling	1	2	3	4	5
L.	Appropriate parking	1	2	3	4	5
M.	Appropriate lack of pests (rats, cockroaches, etc.)	1	2	3	4	5