

Section 8 Rental Listings Request Forms

If you would like to list a rental unit on the North Iowa Regional Housing Authority (NIRHA) website, fax this form to (641) 423-1624; mail to NIRHA, 202 1st St SE Suite 203, Mason City, IA 50401; or email the information from this sheet to info@nirha.com.

Please print legibly and fill out completely.

Property listings are listed for sixty days. After sixty days, a new property listing must be submitted. **Please contact us when the unit is rented by calling (641) 423-0897 extension 1.**

NIRHA makes no recommendations as to the suitability of tenants. These listings will be placed on the NIRHA website and office bulletin board.

Rental Listing Request

Address: _____ City _____ Date Available _____

Contact Person: _____ Phone Number: _____ Email Address _____

Number of Bedrooms: _____ **Type:** Single Family Home _____ Apartment _____ **Handicap accessible?** Yes _____ No _____

Monthly Rent: \$ _____ Security Deposit: \$ _____ Pets Allowed? _____ Pet Deposit: \$ _____

Utilities: All included: Yes _____ No _____ **Paid by Tenant:** Gas _____ Electricity _____ Water/Sewer _____ Trash _____

Heat Type: Gas _____ Electric _____ **Cooking Type:** Gas _____ Electric _____

Appliances Included: Yes or No: Stove _____ Refrigerator _____ **Garage Included:** Yes _____ No _____

Other Comments: _____

Rental Listing Request

Address: _____ City _____ Date Available _____

Contact Person: _____ Phone Number: _____ Email Address _____

Number of Bedrooms: _____ **Type:** Single Family Home _____ Apartment _____ **Handicap accessible?** Yes _____ No _____

Monthly Rent: \$ _____ Security Deposit: \$ _____ Pets Allowed? _____ Pet Deposit: \$ _____

Utilities: All included: Yes _____ No _____ **Paid by Tenant:** Gas _____ Electricity _____ Water/Sewer _____ Trash _____

Heat Type: Gas _____ Electric _____ **Cooking Type:** Gas _____ Electric _____

Appliances Included: Yes or No: Stove _____ Refrigerator _____ **Garage Included:** Yes _____ No _____

Other Comments: _____

Rental Listing Request

Address: _____ City _____ Date Available _____

Contact Person: _____ Phone Number: _____ Email Address _____

Number of Bedrooms: _____ **Type:** Single Family Home _____ Apartment _____ **Handicap accessible?** Yes _____ No _____

Monthly Rent: \$ _____ Security Deposit: \$ _____ Pets Allowed? _____ Pet Deposit: \$ _____

Utilities: All included: Yes _____ No _____ **Paid by Tenant:** Gas _____ Electricity _____ Water/Sewer _____ Trash _____

Heat Type: Gas _____ Electric _____ **Cooking Type:** Gas _____ Electric _____

Appliances Included: Yes or No: Stove _____ Refrigerator _____ **Garage Included:** Yes _____ No _____

Other Comments: _____