

**PRIVATE RENTAL SURVEY  
TRAILER SPACES**

City and State:		
Name of Trailer Park:		
Street Address of Park:		
Mailing City and State:	Survey I.D. Number:	Community Code:
Manager or Owner's Name:	Zip Code:	Manager/Agent Phone:

**PARK/SITE DATA (FILL IN APPROPRIATE BLANKS AND CHECK BEST CHOICE)**

<p>1. Single-Wide Sites</p> <p>A. Total Square Feet <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>B. Monthly Contract Rent (round to the nearest dollar) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>2. Double-Wide Sites</p> <p>A. Total Square Feet <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>B. Monthly Contract Rent (round to the nearest dollar) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>3. Year Trailer Park Constructed <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>4. Trailer Pad Construction</p> <p><input type="checkbox"/> A. Hard Surface (cement, asphalt, etc.)</p> <p><input type="checkbox"/> B. Natural Surface (dirt, gravel, etc.)</p> <p>5. Community Laundry</p> <p><input type="checkbox"/> A. Complimentary Tenant Use</p> <p><input type="checkbox"/> B. Coin-operated Machines</p> <p><input type="checkbox"/> C. No Laundry Facilities in Park</p> <p>6. Community Swimming Pool</p> <p><input type="checkbox"/> A. Complimentary Tenant Use</p> <p><input type="checkbox"/> B. Tenants Pay to Use Pool</p> <p><input type="checkbox"/> C. No Pool in Park</p>	<p>7. Services Paid for by Landlord:</p> <p>Water (including wells) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Sewer (including septic) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Garbage <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Lawn Care <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Cable TV <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Satellite Dish Hook-up <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Electricity <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Heating Fuel <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Snow Removal <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>8. Site Amenities:</p> <p>Water Service (including wells) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Electricity <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Fuel Delivery/Storage <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Police Protection <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Fire Protection <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Sanitation Services (including septic) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Telephone Services <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Are Noise Levels/Odors Acceptable? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Miscellaneous Improvements:</p> <p>Paved Roads <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Sidewalks <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Street Lights <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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**Paperwork Reduction Act Statement:** This information is being used to determine private sector rental rates for trailer spaces, and will be used to establish rental rates for occupants of government-furnished quarters. Response to this request is voluntary. No action may be taken against you for refusing to supply the information requested. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a current valid Office of Management and Budget (OMB) control number.

**Estimated Burden Statement:** Public reporting burden for this form is estimated to average 10 minutes per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate, or any other aspect of this form, to Office of the Secretary, Main Interior Building, Office of Acquisition and Property Management, 1849 C Street N.W., MS 5512, Washington, DC 20240.

**Privacy Act Statement:** Your participation is voluntary. If you do participate, you do not have to give us personal information in order to complete this form. The data obtained from you will be treated confidentially, and will be used only for statistical purposes – to measure private rental rates in your community and region. However, we reserve the right to contact you to clarify this information or to verify our contractor's performance. We will not disclose this information; it is published only in aggregate form. We do not give, sell or transfer any personal information to a third party. It will not be shared with other property managers or rental companies. Direct comments regarding the Privacy Act, or any other aspect of this form, to Office of the Secretary, Main Interior Building, Office of Acquisition and Property Management, 1849 C Street N.W., MS 5512, Washington, DC 20240.

Completed By: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_