



100 Arch St., LR, AR. 72201
501-340-4821 / 501-340-4714 (fax)

EMERGENCY HOUSING VOUCHER PROPERTY LISTING FORM

Owner/Agent Name: _____

Owner/Agent Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Property Address: _____ Apt. # _____

City: _____ State: _____ Zip: _____

Telephone for Inquires: _____ Date Unit Available: _____

Type of Unit: Single Family: ___ Apartment: ___ Duplex: ___ Townhouse: ___

Mobile Home: ___ High Rise: ___

Year of Construction: _____ Number of Bedrooms: _____

Number of Bathrooms: ___ Requested Rent: _____ Deposit: _____

Handicapped Accessible: _____

Signature of Owner/Agent: _____ Date: _____

Please return completed form to landlords@mhapha.org or fax to 501-340-4821.