



Interest Survey

Date: _____ Property Name: _____

Property Address: _____

Management Company/Owner: _____

How Many Units: _____ Type Property: S8 LIHTC Market Rate Condo

If Condo, please select one: Association Governed Individual Owners

Phone: _____ Email: _____

Manager lives on site? YES NO How long at this property: _____

How many years experience in property management: _____

On-Site Assistant Manager: YES NO

(If YES) Assistant Manager Name: _____

No-Tresspass: YES NO MPD Precinct: _____

Do you attend monthly Safeways-Apartment Managers Meetings: YES NO

Community compilation snapshot (check all that apply):

- | | | |
|---|--|---|
| <input type="checkbox"/> African American | <input type="checkbox"/> Immigrants | <input type="checkbox"/> Single Parent Households |
| <input type="checkbox"/> White | <input type="checkbox"/> Seniors | <input type="checkbox"/> Mother |
| <input type="checkbox"/> Hispanic | <input type="checkbox"/> Single Family Head of Household | <input type="checkbox"/> Father |

Zoned Schools - Elementary: _____

Middle: _____

High School: _____

What are your most pressing safety/community concerns? (e.g. Trespass, Vandalism):

Do you have any social or resident services programs on site? YES NO

Names/types of social/resident services programs: _____

Do you have on-site security? YES NO Security Company Name: _____

Security Hours - Day: _____ Night: _____

How did you hear about Safeways? _____