

WEEK OF

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|---|---|------------------------|
| ADDRESS | | PRICE: \$ _____ |
| CONTACT | | |
| BEDROOMS | <input type="checkbox"/> ONE (Bachelor/Studio) <input type="checkbox"/> TWO <input type="checkbox"/> THREE | |
| BATHROOMS | <input type="checkbox"/> ONE <input type="checkbox"/> TWO | |
| UTILITIES (included in the rent price) | <input type="checkbox"/> GAS/HEAT <input type="checkbox"/> WATER <input type="checkbox"/> ELECTRIC/HYDRO | |
| SMOKING | <input type="checkbox"/> OUTSIDE ONLY <input type="checkbox"/> NO SMOKING | |
| PETS | <input type="checkbox"/> PET FRIENDLY <input type="checkbox"/> NO PETS <input type="checkbox"/> PET LIMITED | |
| PARKING | <input type="checkbox"/> STALL <input type="checkbox"/> STREET | |
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