

Hancock County  
Residential Rental Form  
\*\*\*CONFIDENTIAL INFORMATION\*\*\*

Owner:  Phone:

Email:  Fax:

Mailing Address:

Property Address:

**Property Type**  
Enter "Yes" under the type that matches your property.

| Single Family        | Duplex               | Triplex              | 4-6 Family           | Other                |
|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Monthly Rent (Per Unit)

Bedroom Count (Per Unit)

Bathroom Count (Per Unit)

| Unit 1                  | Unit 2                  | Unit 3                  | Unit 4                  | Unit 5                  |
|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| \$ <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> |
| <input type="text"/>    | <input type="text"/>    | <input type="text"/>    | <input type="text"/>    | <input type="text"/>    |
| <input type="text"/>    | <input type="text"/>    | <input type="text"/>    | <input type="text"/>    | <input type="text"/>    |

Any additional information considered helpful for assessment purposes (tenant is a family member/friend, property is also owner's primary residence, property is "rent to own," etc):

Owner Signature:

Date:

Please submit form via mail, fax, e-mail or in person to:  
Hancock County Assessor  
111 American Legion Place - Suite 204  
Greenfield, IN 46140  
Fax: (317) 477-1104  
Questions? Please call: (317) 477-1102  
Or contact by e-mail to: [swilson@hancockcoingov.org](mailto:swilson@hancockcoingov.org)