

## Owner/Property Information Sheet

### **Owner Information:**

Owner Name \_\_\_\_\_

Owner Home Address \_\_\_\_\_  
\_\_\_\_\_

Owner Phone (Home) \_\_\_\_\_ (Cell ) \_\_\_\_\_  
(Fax) \_\_\_\_\_ (Email) \_\_\_\_\_

### **Property Information:**

Rental Property Address \_\_\_\_\_

Complex \_\_\_\_\_

HOA \_\_\_\_\_

HOA Address \_\_\_\_\_

HOA Phone # \_\_\_\_\_

HOA Contact \_\_\_\_\_

HOA Documents \_\_\_\_\_

Last time property professionally inspected: \_\_\_\_\_

Last repairs \_\_\_\_\_

### **Tenant Information:**

#### **Currently Occupied Y/N**

Tenant Name \_\_\_\_\_

Phone (W) \_\_\_\_\_

Phone (H) \_\_\_\_\_

Phone (Cell) \_\_\_\_\_

Tenant Name \_\_\_\_\_

Phone (W) \_\_\_\_\_

Phone (H) \_\_\_\_\_

Phone (Cell) \_\_\_\_\_

Tenant Name \_\_\_\_\_

Phone (W) \_\_\_\_\_

Phone (H) \_\_\_\_\_

Phone (Cell) \_\_\_\_\_

Tenant Name \_\_\_\_\_

Phone (W) \_\_\_\_\_

Phone (H) \_\_\_\_\_

Phone (Cell) \_\_\_\_\_

Are All Tenants on the Lease: Y/N \_\_\_\_\_

Length of Lease \_\_\_\_\_ Month-to-Month \_\_\_\_\_ Length of Tenancy \_\_\_\_\_

Moving Out? \_\_\_\_\_ When? \_\_\_\_\_

Rent Amount \_\_\_\_\_ Deposit Amount \_\_\_\_\_

Current Management Company \_\_\_\_\_

Management Company Contract Expiration \_\_\_\_\_

### **Insurance:**

Insurance \_\_\_\_\_

Coverage \_\_\_\_\_

### **Pets:**

Pets Y/N \_\_\_\_\_ Species \_\_\_\_\_ Breeds \_\_\_\_\_

Pet Deposit \_\_\_\_\_

Pet Exceptions \_\_\_\_\_

## Rooms

\_\_\_\_\_ Bedrooms  
\_\_\_\_\_ Baths  
\_\_\_\_\_ Square Feet  
\_\_\_\_\_ Year Built

## Appliances

\_\_\_\_\_ A/C  
\_\_\_\_\_ Stove: Gas Electric  
Model/Serial # \_\_\_\_\_  
\_\_\_\_\_ Oven: Gas Electric  
Model/Serial # \_\_\_\_\_  
\_\_\_\_\_ Dishwasher  
Model/Serial # \_\_\_\_\_  
\_\_\_\_\_ Microwave  
Model/Serial # \_\_\_\_\_  
\_\_\_\_\_ Trash Compactor  
Model/Serial # \_\_\_\_\_  
\_\_\_\_\_ Washer  
Model/Serial # \_\_\_\_\_  
\_\_\_\_\_ Dryer  
Model/Serial # \_\_\_\_\_  
\_\_\_\_\_ Alarm  
Model/Serial # \_\_\_\_\_  
Code In \_\_\_\_\_  
Code Out \_\_\_\_\_  
Brand \_\_\_\_\_  
Monitored: Y/N  
Company Phone \_\_\_\_\_  
\_\_\_\_\_ Other \_\_\_\_\_  
Serial # \_\_\_\_\_  
\_\_\_\_\_ Other \_\_\_\_\_  
Serial # \_\_\_\_\_  
\_\_\_\_\_ Other \_\_\_\_\_  
Serial # \_\_\_\_\_

## Mailbox

Key Y/N \_\_\_\_\_ # Keys \_\_\_\_\_  
Location \_\_\_\_\_

## Garage Door Openers

Remote Y/N \_\_\_\_\_ # Remotes \_\_\_\_\_

House Keys # \_\_\_\_\_

## Paint:

\_\_\_\_\_ Room \_\_\_\_\_  
Brand \_\_\_\_\_  
Code \_\_\_\_\_  
Location \_\_\_\_\_  
\_\_\_\_\_ Room \_\_\_\_\_  
Brand \_\_\_\_\_  
Code \_\_\_\_\_  
Location \_\_\_\_\_  
\_\_\_\_\_ Room \_\_\_\_\_  
Brand \_\_\_\_\_  
Code \_\_\_\_\_  
Location \_\_\_\_\_  
\_\_\_\_\_ Room \_\_\_\_\_  
Brand \_\_\_\_\_  
Code \_\_\_\_\_  
Location \_\_\_\_\_  
\_\_\_\_\_ Room \_\_\_\_\_  
Brand \_\_\_\_\_  
Code \_\_\_\_\_  
Location \_\_\_\_\_

## Parking

1 2 3 4 Car Garage  
\_\_\_\_\_ Remotes # \_\_\_\_\_  
\_\_\_\_\_ Covered Spaces/Assigned # \_\_\_\_\_  
\_\_\_\_\_ Uncovered Assigned Spaces # \_\_\_\_\_  
\_\_\_\_\_ Street Parking

## Outside Features

\_\_\_\_\_ Gated Y/N  
Gate Code \_\_\_\_\_  
\_\_\_\_\_ Sprinklers  
Brand \_\_\_\_\_  
Model \_\_\_\_\_  
Manual/Automatic  
\_\_\_\_\_ Gardener Included Y/N  
Gardner Name \_\_\_\_\_  
Gardner Phone # \_\_\_\_\_  
Gardening Day \_\_\_\_\_  
\_\_\_\_\_ Trash Day \_\_\_\_\_  
Trash Company \_\_\_\_\_  
\_\_\_\_\_ Pool Y/N  
Pool Maintenance Company \_\_\_\_\_  
Pool Company Name \_\_\_\_\_  
Pool Company Phone \_\_\_\_\_  
Maintenance Schedule \_\_\_\_\_  
\_\_\_\_\_ Insect/Pest Control \_\_\_\_\_  
Company \_\_\_\_\_  
Schedule \_\_\_\_\_  
\_\_\_\_\_ Other \_\_\_\_\_  
\_\_\_\_\_ Other \_\_\_\_\_  
\_\_\_\_\_ Other \_\_\_\_\_

## Complex Amenities

\_\_\_\_\_ Pool  
\_\_\_\_\_ Spa  
\_\_\_\_\_ Clubhouse  
\_\_\_\_\_ Laundry  
\_\_\_\_\_ Rec Room  
\_\_\_\_\_ Playground  
\_\_\_\_\_ Exercise Room  
\_\_\_\_\_ Tennis Court  
\_\_\_\_\_ Sauna  
\_\_\_\_\_ Volleyball  
\_\_\_\_\_ Steam Room  
\_\_\_\_\_ Other  
\_\_\_\_\_ Keys # \_\_\_\_\_

## Gated Y/N

Gate Code \_\_\_\_\_

## Other

Available \_\_\_\_\_

## Utilities

Phone Service \_\_\_\_\_  
Gas/Electric \_\_\_\_\_  
Cable \_\_\_\_\_  
Water/Sewer \_\_\_\_\_  
Trash \_\_\_\_\_  
Propane \_\_\_\_\_

## Payment by:

\_\_\_\_\_ Check \_\_\_\_\_ Direct Deposit