OWNER/PROPERTY/TENANT INFORMATION

Please fill out the Owner/Property/Tenant information below completely and to the best of your knowledge so we may efficiently begin your account setup process. The detailed and accurate information you provide will help us manage your property to the full extent of our ability. Be sure to let us know if there is anything you are not clear on, or need further clarification with. We are here to help! *If you don't know the answer to any of the information requested, please notate with a question mark* (**?**) *on the form.*

OWNER #1 INFORMATION		
First Name:	Middle Name:	Last Name:
Name of LLC or LLP (If Applicable):		
Date Of Birth: _____/_____/_____	Social Security Number: _____ - _____ - _____	
Drivers License Number:	Email:	
Cell Phone:	Home Phone:	Work Phone:
Preferred Contact Method? ☐ Cell Phone ☐ Home Phone ☐ Work Phone ☐ Email ☐ Text Message		
Owners Home Address:		
City:	State:	Zip Code:
OWNER PREFERENCES		

We communicate with you at the level at which you wish to be involved. What is your preferred amount of communication/involvement between us and you while we manage your property and its tenants? We will do our best to meet your expectations. Check which description best suits you....

☐ **Hands On Owner** - You wish to be informed/involved in every single decision/action from big to small concerning your property and it's occupants. We will involve you in all decisions/actions taken and acquire prior approval when applicable.

☐ **Average Joe Owner** – You trust us to use our best discretion. You want us to handle the normal everyday type stuff behind the scenes and keep you unburdened by its stress. We will keep you in the loop on matters of importance but not in excess.

☐ **Turn Key Owner** – You hired us because you don't want to be bothered with all the little stuff. We will only involve you if it's absolutely necessary and/or because of needed repairs/maintenance in excess of the Lease mandated $300.

NOTE: Regardless of type, property specific information, rent, expenses, and etc are always fully accessible within the owner's portal/account 24/7.

Tenant Selection:
☐ **I Want** to be involved in approving/denying tenants.
☐ **I Do Not Want** to be involved in approving/denying tenants.

Property Maintenance/Repairs:
☐ I want **Management** to schedule/handle all work performed.
☐ I want **Management** to schedule/handle all the work but request **My Vendors** be used (list in OTHER VENDORS section below).

☐ **I Will** do the work myself and/or schedule my vendors do the work on my behalf.

SPOUSE/PARTNER INFORMATION		
First Name:	Middle Name:	Last Name:

Date Of Birth: _____/_____/_____   Social Security Number: _____ - _____ - _____

Drivers License Number: Email:

Cell Phone:	Home Phone:	Work Phone:

OWNER #2 INFORMATION		
First Name:	Middle Name:	Last Name:

Name of LLC or LLP (If Applicable):

Date Of Birth: _____/_____/_____   Social Security Number: _____ - _____ - _____

Drivers License Number: Email:

Cell Phone:	Home Phone:	Work Phone:

Preferred Contact Method? ☐ Cell Phone ☐ Home Phone ☐ Work Phone ☐ Email ☐ Text Message

Owners Home Address:

City:	State:	Zip Code:

NOTE: Owner #2 (if applicable) receives the same level of involvement/communication as that of Owner #1

SPOUSE/PARTNER INFORMATION		
First Name:	Middle Name:	Last Name:

Date Of Birth: _____/_____/_____   Social Security Number: _____ - _____ - _____

Drivers License Number: Email:

Cell Phone:	Home Phone:	Work Phone:

PROPERTY INFORMATION

Subdivision/Complex Name:

Street Address: Unit #:

City:	State:	Zip Code:

Property Type: ☐ House ☐ Apt ☐ Studio ☐ Condo ☐ Townhome ☐ Duplex ☐ Triplex ☐ 4-8 Units

Year Built:	Lot Size:	Square Feet:

How many stories is the unit? ☐ 1 ☐ 2 ☐ 3	Is the unit upstairs/downstairs? ☐ Up ☐ Down
Is the unit attached/detached? ☐ Attached ☐ Detached	School District:

Is the property currently for sale? ☐ Yes ☐ No ... If yes, listing agent's phone? _____
Do you have a website for the property? ☐ Yes ☐ No ... http://www._____
Has a death occurred in the property within the last 3 years? ☐ Yes ☐ No … If yes, why/how? _____ _____
What are your long term plans for this property? _____ _____

REMOTES/CODES/KEYS

KEYS

Keys needed for (check all that apply)? ☐ Property ☐ Mailbox ☐ Pool ☐ Storage ☐ Other _____

SECURITY SYSTEM

Security System Name:	Security Code:
Company:	Phone #:

If the alarm goes off is the company alerted? ☐ Yes ☐ No … If yes, what's the password? _____

GARAGE DOOR/OPENER

Is the garage door motorized? ☐ Yes ☐ No	Model:
Number of motorized garage doors? ☐ 1 ☐ 2 ☐ 3 ☐ 4	Number of remotes? ☐ 1 ☐ 2 ☐ 3 ☐ 4

Is there a keypad on the outside of the garage? ☐ Yes ☐ No … If yes, what's the code? _____

SECURITY GATE

Is the property in a gated community? ☐ Yes ☐ No

Gate Code:	Number of remotes? ☐ 1 ☐ 2 ☐ 3

MAILBOX

Does the mailbox require a key? ☐ Yes ☐ No	Mailbox location?	Mailbox #:

GARAGE/PARKING/DRIVEWAY

Is there a garage? ☐ Yes ☐ No	What size garage? ☐ 1-car ☐ 2-car ☐ 3-car ☐ 4-car
Is the garage attached? ☐ Yes ☐ No	Are there remote openers? ☐ Yes ☐ No … If so, how many? _____

Is there a carport? ☐ Yes ☐ No	Is the carport covered? ☐ Yes ☐ No	Is there RV parking? ☐ Yes ☐ No
Are there any assigned parking spaces? ☐ Yes ☐ No … Covered? ☐ Yes ☐ No … How many? _____		
Driveway: ☐ Paved ☐ Unpaved ☐ Gravel ☐ Combination	Is parking in driveway allowed? ☐ Yes ☐ No	
Additional parking info:		

ROOMS

Bedrooms: ☐ 1 ☐ 2 ☐ 3 ☐ 4	Bathrooms: ☐ 1 ☐ 1.5 ☐ 2 ☐ 2.5 ☐ 3 ☐ 3.5 ☐ 4
Additional Rooms (check all that apply): ☐ Living Room ☐ Family Room ☐ Loft ☐ Den ☐ Sitting Room ☐ Bonus Room ☐ Office ☐ Great Room ☐ Sunroom ☐ Wine Cellar ☐ Laundry Room	
Dining info (check all that apply): ☐ Dining room ☐ Formal dining room ☐ Breakfast nook	

KITCHEN

Check all that apply: ☐ Refrigerator ☐ Microwave ☐ Dishwasher ☐ Garbage Disposal ☐ Stovetop ☐ Oven ☐ Range (stovetop/oven combo) ☐ Island ☐ Trash Compactor ☐ Granite Countertops
Additional Kitchen Info:

PROPERTY AMENITIES/ATTRIBUTES

Property Amenities (Check all that apply): ☐ Patio ☐ Deck ☐ Balcony ☐ Fireplace ☐ Dock ☐ Wetbar ☐ Skylights ☐ Newly Remodeled ☐ Blinds/Drapes ☐ Ceiling Fan ☐ Wine Cellar ☐ Laundry Room ☐ Vaulted Ceilings ☐ Media Center ☐ Whirlpool Tub ☐ Spa/Jacuzzi ☐ Sauna ☐ Pool ☐ Alarm System ☐ Air Conditioner ☐ Water Softener ☐ Other _____
Community Amenities (Check all that apply): ☐ Park/Playground ☐ Clubhouse ☐ Fitness Center ☐ Walking Trails ☐ Golf Course ☐ Spa/Jacuzzi ☐ Sauna ☐ Pool ☐ Tennis Court ☐ BBQ ☐ Laundry Facilities
Location (Check all that apply): ☐ Mountain Views ☐ Ocean View ☐ Historic District ☐ Lake Front ☐ Ocean Front ☐ Gated Community
Exterior Walls: ☐ Aluminum Siding ☐ Wood Siding ☐ Stucco ☐ Other
Roof Composition: ☐ Asphalt Shingles ☐ Wood Shake ☐ Clay Tile ☐ Slate ☐ Concrete Tile ☐ Metal Roof ☐ Hot Mop

Basement ☐ Yes ☐ No … If yes ☐ Finished ☐ Unfinished	Crawl space? ☐ Yes ☐ No
Fireplace? ☐ Yes ☐ No … Type: ☐ Gas ☐ Electric ☐ Wood Burning … Location? _____	
Washer/Dryer hookups? ☐ Yes ☐ No … Location? _____ … Type? ☐ Gas ☐ Electric	

Washer/Dryer in unit? ☐ Yes ☐ No … Who is responsible for maintaining? ☐ Owner ☐ Tenant

Handicap Accessible? ☐ Yes ☐ No	Security System? ☐ Yes ☐ No
Smoke Detectors? ☐ Yes ☐ No	Carbon Monoxide Detectors? ☐ Yes ☐ No

Automatic Sprinklers? ☐ Yes ☐ No … If yes, where is the control panel located? _____

FLOORING

Interior Flooring (Check all that apply):

☐ Carpet Location(s) _____

☐ Vinyl Location(s) _____

☐ Laminate Location(s) _____

☐ Tile Location(s) _____

☐ Hardwood Location(s) _____

☐ Concrete Location(s) _____

☐ Travertine Location(s) _____

COOLING/HEATING

Cooling: ☐ N/A ☐ Central ☐ Wall/Window Unit ☐ Other: _____
Heating: ☐ Central ☐ Wall Heater ☐ Other: _____

YARD/OUTSIDE

Backyard? ☐ Yes ☐ No … Fenced? ☐ Yes ☐ No	Front yard? ☐ Yes ☐ No … Fenced? ☐ Yes ☐ No

Automatic Sprinklers? ☐ Yes ☐ No … If Yes, location of control panel? _____

UTILITIES/APPLIANCES/VENDORS

Appliances included for Tenant use (Check all that apply): ☐ Washer/Dryer ☐ Refrigerator ☐ Microwave ☐ Dishwasher ☐ Garbage Disposal ☐ Stovetop ☐ Oven ☐ Range (stovetop/oven combo)

WATER

☐ Owner Pays ☐ Tenant Pays	Water Source: ☐ Public Utility ☐ Private Well
Billing is currently in owner's name? ☐ Yes ☐ No	Billing is currently in tenant's name? ☐ Yes ☐ No
Main water shut off location?	Is the water currently on? ☐ Yes ☐ No

Water Company Name:		
Payment Address:		
Payment Amount: $	Payment Due Date:	Account #:
SEWER/SEPTIC		
☐ Owner Pays ☐ Tenant Pays	Is there a septic system ☐ Yes ☐ No	
When was the septic last pumped/emptied?		
Septic Service Company Name:		Phone:
POWER (ELECTRICITY/GAS)		
☐ Owner Pays ☐ Tenant Pays		
Billing is currently in owner's name? ☐ Yes ☐ No	Billing is currently in tenant's name? ☐ Yes ☐ No	
Fuse Box location?	Is the power currently on? ☐ Yes ☐ No	
Main gas shut off location?	Is the gas currently on? ☐ Yes ☐ No	
Power Company Name:	Phone #:	
Payment Address:		
Payment Amount: $	Payment Due Date:	Account #: