

New Property Information Form To Accompany Management Agreement

Property Address:

General Marketing Information (Please complete all the sections that apply)

Rental List Date: Availability Date: Initial List Price:

Owner Move Out Date:

Pets: Yes: No: I will consider pets with the following restrictions:

Owner Return to Property Clause Lease: Yes: No: I am going to be residing out of the area and will

need to return to my property if I am relocated back to the area with my current employer.

Garage Door # Of Spaces: # Of Openers Provided:

Of Parking Space(s): Parking Space #(s): Decal Required: Yes: No:

Mailbox#: Location of Mailbox:
Storage Unit#: Location of Storage Unit:

Fobs#: Move In Fee: Parking Fee:

Association Contact Number for Tenant Questions:

Pet Restrictions (For Association):

Yes: No: Additional Forms and Addendums to the Lease are required by the Association for the leasing of the property (please list all forms that are required).

Property Maintenance To Be Included as Part Of Lease:

Lawn Service: Yes: No: If yes, please describe scope of service:

Pest Service: Yes: No: If yes, please describe scope of service

Owner Information for Showing(s):

Showing Contact Name:

Contact Number: Yes: No: Send me Text messages to confirm a showing

Contact Email Address:

Notice Required: 24 Hour Prior Day 8 Hour 4 Hour Vacant

Pet at Property: Yes: No: (If yes, the pet will need to be secured or removed when there are showings)

Lockbox Install Location:

Where to park for showings:

Special Instructions for Agents/Realtors Showing the Property:

		(PR)
Tenant !	Maintenai	nce To Be Included As Part Of Lease: Mowing Yard Front: Back: Side:
Yes:	No:	Gutter Cleaning
Yes:	No:	Leaf Removal
Yes:	No:	Wood Fireplace Cleaning
Yes:	No	Replacing Furnace Filter Monthly: Every Months:
Yes:	No:	Furnace Filter Is Part of System and Needs To Be Cleaned Every Months
Specifi	c Propert	y Information
Homeo	wner or C	ondo Association Name:
Manage	ement Cor	npany Name:
Compa	ny Addres	s:
Compa	ny Phone:	
-	ny Email:	
-	ny website	e:
•	Fees for a	ny use of association facilities: Yes: No: If yes, please note cost and amenities
Numbe	r Of Passe	es:
Associa	ation Ame	nities (swimming pool, etc. included):
		s Individually Metered (Tenant shall be responsible for payment of the following)
Yes:	No:	Gas Co.:
Yes	No:	Water/Sewer Co.:
Yes	No:	Trash Co.:
	-	ays and Location:
Recycle	e Pick Up	Days and Location:
Yes:	No:	Cable/TV/Internet Co.:
Yes:	No:	Power Company:
<u>Utilitie</u>	s/Services	s Included As Part Of the Lease:
Main U	J tility Loc	cation Information:
Gas Me	eter:	
Electric	Meter:	
Gas Sh	ut-Off:	
Main P	ower Pane	s]:
	ower rune	·



Main Water Shut-Off:

Exterior Hose Bib Shut-Off (1):



Exterior Hose Bib Shut Off (2): Exterior Hose Bib Shut-Off (3): HVAC Filter(s):

Fixtures And Appliances Provided As Part Of The Lease:

Yes:	No:	Stove Or Range Gas: Electric	Yes:	No:	Cooktop Gas: Electric:
Yes:	No:	Wall Ovens #: Gas: Electric:	Yes:	No:	Built-in Microwave
Yes:	No:	Refrigerator w/ Icemaker Yes: No:	Yes:	No:	Dishwasher
Yes:	No:	Disposal	Yes:	No:	Hot Water Heater Gas: Electric:
Yes:	No:	Washer	Yes:	No:	Dryer Gas: Electric:
Yes:	No:	Window A/C Unit(s) #:	Yes:	No:	Ceiling Fan(s) #:
Yes:	No:	Furnace Humidifier	Yes:	No:	Dehumidifier
Yes:	No:	Water Softener	Yes:	No:	Auto Garage Door(s) #:
Yes:	No:	Garage Opener(s) #:	Yes:	No:	Alarm System
Yes:	No:	Carpeting	Yes:	No:	Window Treatments
Yes:	No:	Hardwood Floors (Polyurethane)	Yes:	No:	Hardwood Floors (Waxed)
Yes:	No:	Hot Tub Equipment, Cover	Yes:	No:	Satellite Dish
Yes:	No:	Cable Ready	Yes:	No:	HVAC Gas: Electric:

Additional Fixtures and Appliances Not Listed Above:

Appliance Information (Include all listed above that are included with lease):

Appliance: Make/Model/Serial #: Appliance: Make/Model/Serial #:

Additional Information For Tenant: