## **New Property Intake Form**

Property Address:		
Ownership Type:   Individual   LLC   Trust		
Owner Representative:		
Cell Phone: Contract Execution Date:		
Email:		
Other Owner: Phone:		
Other Owner Email:		
☐ If more than two owners indicate here and write contact info on back.		
Insurance Co.: Renewal Date:		
HOA: Phone:		
Currently Rented: Current Rent: Lease End Date:		
If rented, we will need a copy of the lease, application and contact info for tenants.		
PROPERTY DETAILS		
Type of Property: # of units: Desired Rent:		
Square Footage: # Bedrooms: # Bathrooms: Stories:		
Office: yes / no Additional Living Space: Yes / no Dining type:		
Garage Spaces: # spaces: # spaces:		
Utilities:		
Any owner paid utilities:		
Company Info: Electric: Water:		
Gas: Cable:		
Stove: ☐ Electric ☐ Gas Dryer: ☐ Electric ☐ Gas		

Property Address:		
Appliances Included:		
☐ Refrigerator □	☐ Microwave ☐ Washer	□ Dryer
☐ Laundry hook ups	ONLY Select Type: F	Full size / stackable
Types of Flooring (wo	ood, carpet, stained concrete,	tile, linoleum, etc.):
Living:	kitchen:	Dining:
Bedroom 1:	Bedroom 2:	Bedroom 3:
Bedroom 4:	Bathroom 1:	Bathroom 2:
Other Spaces:		
Additional Pet Deposi	ts:	mt: Penalty for smoking:
Yard: S	prinkler System:	Fence (type):
Please list any feature	es that make your property un	ique:
Community Amenitie	s:	
School District:	**************************************	
Elementary:		
Middle:		
High School:		