

OWNER INFORMATION

| Owner(s) Name(s): | / | |
|------------------------------------|--|--|
| Address: | | |
| City, State, Zip: | | |
| Email Address: | / | |
| Work Phone #: | / | |
| Home Phone #: | // | |
| Cell Phone #: | // | |
| Date of Birth: | | |
| Requested Portfolio Minimum (PMI N | finimum is \$400) \$ | |
| | nt Distribution (If Multiple Owners. This he percentage each owner will be paid | |
| Owner #1: | _% | |
| Owner #2: | _% | |
| Other: | | |



PROPERTY INFORMATION SHEET (Fill out one info sheet PER property)

| roperty Type (Check one): House TownHome Dup | ex Apartment Cond | o Multifamily |
|---|-------------------------|--------------------------------|
| ame of Neighborhood: | | |
| Idress of rental property: | | |
| otal Sq. Footage: | | |
| otal Living Area: Upstairs Main Floor _ | Basement | |
| otal Number of Floors: | | |
| Property Ready to Lease / Rent Ready? | | |
| ear Built: | | |
| otal Bedrooms: Upstairs | Main Floor | Basement |
| otal Bathrooms: Upstairs | Main Floor | Basement |
| arget Rent per Month to Start Marketing Property: \$ | | |
| arget Deposit \$ (We typica | ally do One Month's Ren | t, but there is no limit in CC |
| asement: NONE FINISHED PARTIALLY FINIS | HED | |
| ate Code: | | |
| chool District | | |
| low did you hear about us?(Circle all that apply) Internet Fr i Vho can we thank for referring you? | iend Advertisement Exp | o Other |
| Itility Companies (Even if tenant is not responsible): | | |
| lectricity | Gas | |
| Vater | | |
| rashecycling | | |
| lease CHECK all Utilities to be paid for by TENANT: | Recycling Fickup Day | |
| lectric Gas Water Sewer Trash Recycling | Other: | |
| Jarm Code | | |



| Name: | |
|---|---|
| Address: | |
| Email/ Website: | |
| Phone: # | |
| Policy #: | |
| Mailbox Location: | |
| Mailbox #: | |
| Is your home part of an HOA? Yes No | |
| Name: | |
| Address: | |
| Email: | |
| Website: | |
| Phone: # | |
| HOA fees included in rent? Yes No (We re | ecommend to include in the Rent amount) |
| HOA fees \$ | Fee Payment Frequency: |
| For Rent or For Sale Signs allowed in Community? Yes_ * Please email in your HOA Community CCRs (Rules an | |

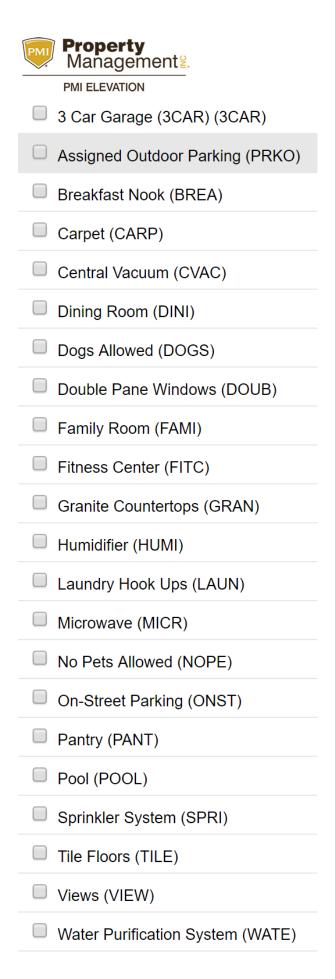


Please Check all that apply to your property:

| 1 Car Garage (1CAR) |
|-----------------------------------|
| Air Conditioning (AIRC) |
| Balcony (BLCN) |
| Brick Patio (BRIC) |
| Cats Allowed (CATS) |
| Convection Oven (COVN) |
| Dishwasher (DSHW) |
| Dogs and Cats Allowed (DOGS) |
| Electric/Gas Heat (ELEC) |
| Fenced-in Yard (FENC) |
| Fridge (FRID) |
| Hardwood Floors (HARD) |
| Jack and Jill Bathroom (JACK) |
| Living Room (LIVI) |
| No Cats (NOCA) |
| Off-Street Parking (OFFS) |
| Open Floor Plan (OPEN) |
| Patio (PATI) |
| Porch (PORC) |
| Stainless Steel Appliances (STAI) |
| Tub/Shower (Mstr Bath) (TUBS) |
| Walk-In Closet (WALK) |



| 2 Car Garage (2CAR) |
|---------------------------------|
| Assigned Covered Parking (PRKC) |
| ☐ Blinds/Shutters (BLIN) |
| Cable-ready (CABL) |
| Ceiling Fans (CEIL) |
| Deck (DECK) |
| ☐ Disposal (DISP) |
| Double Oven (DOUB) |
| Evaporative Cooler (EVAP) |
| Fireplace (FIRE) |
| ☐ Granite Countertop (GRAN) |
| ☐ High/Vaulted Ceilings (HIGH) |
| ☐ Kitchen Island (KITC) |
| ☐ Master Suite (MAST) |
| □ No Dogs (NODO) |
| Office Space (OFFI) |
| Oven (OVEN) |
| Pets Allowed (PETS) |
| Slab Parking (SLAB) |
| Tennis Court (TNCT) |
| ☐ Vaulted Ceilings (VAUL) |
| Washer/Dryer In Unit (WADR) |





| Counter Top Typ | e: Kitche | n | | Bath | 1 | | _ |
|---|------------|------------|---------|------------------|------------|---------|---|
| Smoking Allowed | d: Yes | | _ No | | | | |
| Fully Fenced Yar | d: Yes | No | Partial | _ If so, where? | | | |
| Sprinkler System | ı: Yes | | No | Automa | atic? Yes | No | |
| Parking (Check a | all that a | | | | | | |
| 1 car Garage | | 4 Car Gara | ige | Slab Parking | Street | Parking | |
| 2 Car Garage | | Carport | | Reserved Parkin | g | | |
| 3 Car Garage | | RV Parking | 3 | Assigned Parking | g #/letter | | |
| Date Available to | o Rent: _ | | | | | | |
| Pets Allowed: | Yes | | No | | | | |
| Cats: | Yes | | No | | | | |
| Small Dogs: | Yes | | No | | | | |
| Medium Dogs: | Yes | | No | | | | |
| Large Dogs: | Yes | | No | | | | |
| What neighborhood amenities are included? | | | | | | | |
| How do residents gain access to these amenities? | | | | | | | |
| Please list any other additional amenities or details you would like placed in your ad: | | | | | | | |
| Lease Term Leng | gth Prefe | rred: | | | | | |



Additional Amenities not Listed or Comments:

| Current Tenant Information (If applicable) | |
|--|----|
| Name (s): | / |
| Phone #(s): | / |
| Email: | _/ |