



**Owner Information Sheet**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Company Name (If applicable) \_\_\_\_\_

**Mailing Address**

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

In case of emergency: \_\_\_\_\_

**Property Information** \_\_\_\_\_

Condominium:

Single Family:

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Parcel #: \_\_\_\_\_

# Bedrooms: \_\_\_\_\_

# Bathrooms: \_\_\_\_\_

Sq Feet \_\_\_\_\_

**E-CHECK OR MAIL CHECK**

If E-check complete below:

Bank: \_\_\_\_\_

Account#: \_\_\_\_\_

Routing#: \_\_\_\_\_

**Amenities**

- Air Conditioning
- Balcony
- Disposal
- View
- Garage

- Assigned Covered Parking
- Cable Ready
- Fireplace
- Pool
- Spa

- Assigned Parking
- Dishwasher
- Fitness Center
- Tennis Court
- Washer/Dryer in Unit

Other: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Desired Rent: \_\_\_\_\_

Home Warranty (Y/N): \_\_\_\_\_  
 Warranty company & policy # \_\_\_\_\_  
 \_\_\_\_\_

\*Owner understands our office will make the best attempt to utilize the home warranty program above, however in emergency situations if the response time is not reasonable we will have to call out a contractor to address the issue.

**Home Owners Association :** \_\_\_\_\_  
 Phone Number: \_\_\_\_\_

**Utility Companies:**

Electric: \_\_\_\_\_  
 Water/ Sewer: \_\_\_\_\_  
 Gas: \_\_\_\_\_  
 Cable: \_\_\_\_\_  
 Trash: \_\_\_\_\_

Termite Warranty: YES NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

**Keys:**

Front Door: \_\_\_\_\_ Garage Remotes: \_\_\_\_\_ Pool: \_\_\_\_\_  
 Gate Code: \_\_\_\_\_ Gate Remotes: \_\_\_\_\_ Mailbox: \_\_\_\_\_

Pets: \_\_\_\_\_ (Service animals are not considered pets)