

Real Property Management, Elite

Owner Information

Name: _____
Address _____
Address _____
City, St, Zip _____

Home Phone _____
Work Phone _____
Fax No. _____
Cell Phone _____
E-Mail _____

Property Information

Address _____
Address _____
City, St, Zip _____

Current Tenant Information

Name _____
Name _____
Name _____
Home Phone _____
Work Phone _____
Monthly rent _____

Unit Information

Smoking Yes No Notes: _____
Pets Yes No Notes: _____

Utilities:
Electric Tenant Owner
Gas Tenant Owner
W/S/T Tenant Owner Notes: _____

Ammentiiies:
Bedrooms Main Level _____ Upper _____ Basement _____
Bathrooms Main Level _____ Upper _____ Basement _____
Year built _____
Type House Duplex Apt. Condo Other: _____
Square Ft. _____
Parking Off Street _____ Garage _____ Carport _____
A/C Central Swamp
Cable TV Wired Dish Other: _____
Disposal Yes No
Dishwasher Yes No
Elec. Heat Yes No Gas Heat Yes No
Fireplace Yes No Gas Electric
Fenced Yes No
Furnished Yes No
Patio/Deck Patio Deck
Fridge Yes No Range Yes No Gas Electric
Shed Yes No Available to tenant? Yes No
Sprinklers Yes No
Hook-ups Yes No Laundry Room Yes No

Other: # of House Keys _____ # of Mailbox Keys _____
Date Available _____ # of Garage Door Openers _____
Desired Rent _____
Sign posted Yes No **Referral Source:** Phone Book Newspaper Other: _____
Advertising: WWW, Newspaper, Ind. Ad, Group Ad, Other: (Specify) _____

Outstanding Maintenance:

