

Please complete this form to better assist us in servicing you and your property.

Owner Sheet

Property Address:		
Number Units/Property Type:	Keys:	
Approx. Square Feet:	Bedrooms:	Baths:
Military Clause: Y N	Company Clause: Y N	Fence:
Pets: Y N	Type:	Restrictions:
Appliances Furnished: Y N	Microwave:	
Range:	Dishwasher:	
Refrigerator:	Clothes Washer:	
Garbage Disposal:	Clothes Dryer:	
Smoke Detectors: Y N	CO ₂ Detector: Y N	
Utilities Included: Y N	If yes, which utilities:	
Septic or Sewer:	Location:	Sump Pump: Y N
Age of property:	Garage: Y N (openers) _____	Carport:
Basement:	Crawl-space/Slab:	Pool:
Fireplace: Y N Gas <input type="checkbox"/> Wood <input type="checkbox"/>	HOA Fee:	
Furnace: Gas <input type="checkbox"/> Electric <input type="checkbox"/>	Water Heater: Gas <input type="checkbox"/> Electric <input type="checkbox"/>	Air Conditioner(s):
Emergency Contact:	City/Co. Inspection Info:	Owner Mailing Address:
School Districts: (Bus) Y N	Elementary	H.S.
Police Department:	Fire Department:	
Electric Company:		
Water Company:		
Sewer Company:		
Lease Terms & Conditions:		
Rent Amount:		
Mortgage Payments:		
Additional Notes:		
Phone Number:	E-Mail:	Completed by: