



**Please provide the following information:**

Name:		
Property Address:		
City:	State	Zip
<u>Mailing</u> Address:		
City:	State	Zip
Cell Phone #		
Home Phone #		
Fax #		
E-Mail Address:		
What expenses to pay?		
Direct Deposit?   Y   N		
Bank Information:		
How did you hear about us?		
Other:		

Owner: \_\_\_\_\_ Date: \_\_\_\_\_ Desired Rent: \_\_\_\_\_ Date Available: \_\_\_\_\_

PROPERTY ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

Lock Box: Yes / No Sign Outside: Yes / No Smoking: Yes / No

PETS: NO / OR CASE BY CASE No. of Pets \_\_\_\_\_ Pet Charge [ ] Pet Deposit [ ] Non-Refundable Fee  
Maximum lbs. \_\_\_\_\_ [ ] Non-refundable \$ \_\_\_\_\_ \$ \_\_\_\_\_ For \_\_\_\_\_

BEDROOMS \_\_\_\_\_ BATHS \_\_\_\_\_ TYPE \_\_\_\_\_ SQ. FT. \_\_\_\_\_ AGE \_\_\_\_\_

STYLE: Rambler Split Level Tri-Level 2 Story Multiplex # \_\_\_\_\_

Unit 1 2 3 4 5 AMENITIES Yes No  
Entry Garage \_\_\_\_\_ 1 / 2 / 3 Openers [ ] [ ]

Living Rm \_\_\_\_\_ Carport [ ] [ ]

Kitchen \_\_\_\_\_ RV / Off Street Parking [ ] [ ]

Bath \_\_\_\_\_ Other \_\_\_\_\_

Family Rm \_\_\_\_\_ Drapes Blinds [ ] [ ]

Rec. Rm \_\_\_\_\_ Lot Size \_\_\_\_\_

Fml Rm \_\_\_\_\_ Fenced Front Back Both [ ] [ ]

Fireplace \_\_\_\_\_ Carpet Color \_\_\_\_\_ Hwd floors [ ] [ ]

Den \_\_\_\_\_ Pool Hot Tub Sauna Jacuzzi Club House

Other \_\_\_\_\_ Exercise Room Multiplex Laundry Room

Bedrooms \_\_\_\_\_ View of \_\_\_\_\_

APPLIANCES: Stove Refrigerator Dishwasher Garbage Disposal Microwave Oven Trash Compactor Freezer  
Washer/Dryer Hookups Only Gas [ ] Electric [ ] Built in Vacuum Security Alarm System Intercom

Items left by Owner: \_\_\_\_\_

HEAT: Furnace [ ] Oil [ ] Electric Baseboard [ ] Wall Heater [ ] Forced Air Furnace Gas / Electric [ ] Heat Pump [ ]

Owner will pay: Water Sewer Garbage Cable TV Lawn Care Other \_\_\_\_\_

Location of water main shut off: \_\_\_\_\_

RESTRICTIONS / SPECIALS: \_\_\_\_\_

Ad Section:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_