



# New Account Sign Up

Property Address: \_\_\_\_\_ Date \_\_\_\_\_

Owner Name & Social Security: \_\_\_\_\_

Co-Owner Name & Social Security: \_\_\_\_\_

Contact Information - mailing address: \_\_\_\_\_

\_\_\_\_\_ *home phone*      \_\_\_\_\_ *work phone*      \_\_\_\_\_ *work phone*      \_\_\_\_\_ *cell phone*      \_\_\_\_\_ *cell phone*

\_\_\_\_\_ *email address*      \_\_\_\_\_ *email address*

Rent Amount \$ \_\_\_\_\_ Instructions for dispersing Owner funds (attach **personalized** deposit slips, account numbers, etc.)

\_\_\_\_\_ *bank name*      \_\_\_\_\_ *routing number*      \_\_\_\_\_ *account number*      \_\_\_\_\_ *name on account*

## Utilities

**Note: Utilities need to be turned on and remain on throughout marketing period.**

Utility / Service	Provider	Phone	Owner	Tenant
Electric				
Natural Gas				
Propane				
Water				
Sewerage	<input type="checkbox"/> Public <input type="checkbox"/> Septic tank (location)?			
Trash				
Fire Protection				
T V Cable				
Termite bond	<input type="checkbox"/> Treatment <input type="checkbox"/> Treatment & Repair			
Pest control				
Lawn Service				
Pool/Hot tub Service	Owner <b>MUST</b> provide regular pool maintenance			
HOA				
Other Services				
Other Services				
Other Services				

## Property Description (Unit # \_\_\_\_\_)

Style \_\_\_\_\_ # Bedrooms \_\_\_\_\_ # Baths \_\_\_\_\_ Square Feet \_\_\_\_\_ Year Built \_\_\_\_\_  Dining Room

Living room     Family room/den     Great room     Bonus     Sun room     Working Fireplace(s) # \_\_\_\_\_  Fenced Yard

Screened Porch     Deck     Patio     Balcony    Parking \_\_\_\_\_ Foudation  Slab     Crawl

Other rooms/features? \_\_\_\_\_

Flooring: Hardwood \_\_\_\_\_ Carpet \_\_\_\_\_

Vinyl \_\_\_\_\_ Tile \_\_\_\_\_ Other \_\_\_\_\_

Will you allow pets?  Yes  No If yes, liminations? \_\_\_\_\_

Will you allow Smoker?  Yes  No Liminations: \_\_\_\_\_

## Neighborhood

Is there an Homeowners/Condo Association?  No  Yes If yes, provide association contact information, copy of by-laws, rules & regulations

Do Tenants have access to:  Swimming Pool  Tennis Courts  Other amenities? Include any special instructions for the use of these amenities.

Unit	Status / Age O - Operable I - Inoperable N - Not supplied	Color	Brand / Model Number	Comments
Stove/Range				
Oven				
Disposal				
Dishwasher				
Refrigerator				
Microwave				
Washer				
Dryer				
Trash Compacter				
Water heater				
Garage door opener				
Other				
Other				
Other				

### Mechanical Systems

Location of Electrical Panel(s) \_\_\_\_\_

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

Sprinkler system  No  Yes If yes, location of control panel & contacts for adjustments & repairs \_\_\_\_\_

Is there a Security system  No  Yes If yes, provide complete information about codes, operation, monitoring contracts, billing, etc.

Heating:  Gas  Electric  Central  Heat pump  floor furnace  Space  Baseboard  Other \_\_\_\_\_

Cooling:  Gas  Electric  Central  Heat pump  floor furnace  Space  Baseboard  Other \_\_\_\_\_

### Insurance / Warranty Information

Insurance carrier \_\_\_\_\_ Policy # \_\_\_\_\_ Agent & Phone \_\_\_\_\_

Home warranty  No  Yes Include copy of warranty

Termite bond  No  Yes If yes, Company name \_\_\_\_\_ Phone \_\_\_\_\_

Other warranty \_\_\_\_\_

*Please provide copies of insurance policy delarations page and all warranty/bond contracts.*

## Miscellaneous

Are you aware of any air quality problems such as mold or mildew with your property?  No  Yes If yes, please explain \_\_\_\_\_

Describe any current or recent problems you have had with the property, systems or appliances \_\_\_\_\_

Is there any additional information or condition effecting your property a resident or we should know? \_\_\_\_\_

Are there any unusual lese terms or conditions to impose?  No  Yes If yes, explain \_\_\_\_\_

Does your neighborhood have any restrictions the residents or we should know about? No yes If yes, explain \_\_\_\_\_

Give the complete name, address, phone numbers and email addresses for any emergency contact outside your household \_\_\_\_\_

Does the property have a lien on it (mortgage)?  No  Yes Are you current on the monthly payments  No  Yes

Please list below additional comments or concerns:

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date