

# PROPERTY INTAKE SHEET

## PROPERTY DESCRIPTION

Owner(s): \_\_\_\_\_

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

County: \_\_\_\_\_ Subdivision: \_\_\_\_\_

Year Built: \_\_\_\_\_ Approx. Square Footage: \_\_\_\_\_

Directions to Property: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## **Please Check Each Item That Applies to Your Property:**

### HOA

Is there an HOA?  Yes  No If yes, please provide contact info for the management company:

Company Name: \_\_\_\_\_ Manager: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Website: \_\_\_\_\_

### PROPERTY DESIGN & TYPE

House  Townhome  Condo (\_\_\_\_ Floor)  \_\_\_\_-Plex

1 Story  1 ½ Story  2 Story  3 Story/Level  Multi-Level

### PARKING

Garage (\_\_\_\_ Car)  Carport (\_\_\_\_ Car)  Driveway  Community Parking Garage

Auto Garage Opener:  Yes  No If yes, what Make/Model: \_\_\_\_\_

### PETS

Cats allowed  Dogs Allowed (under 50 lbs)  Dogs Allowed (over 50 lbs)  No Pets

If dogs are okay, and specific breeds to be excluded? \_\_\_\_\_

### INTERIOR

# of Bedrooms: \_\_\_\_\_ # of Full Baths: \_\_\_\_\_ # of ½ Baths: \_\_\_\_\_

Master Bedroom on which floor: \_\_\_\_\_

Basement:  Yes  No If yes,  Finished  Unfinished

Fireplace: Quantity: \_\_\_\_\_ Location(s): \_\_\_\_\_

Type:  Gas  Gas Logs  Wood Burning  Propane

Is there an alarm system?  Yes  No If yes, is it currently monitored?  Yes  No  
If yes, please provide access info: \_\_\_\_\_

Carbon Monoxide Detector Location(s): \_\_\_\_\_

Smoke Detector Location(s): \_\_\_\_\_

**APPLIANCES & UTILITIES**

Range:  Electric  Gas  
Oven:  Electric  Gas  Convection  Double  
 Refrigerator  Dishwasher  Microwave  Garbage Disposal  
 Washing Machine  Dryer (Electric)  Dryer (Gas)  Stackable W/D  
 Washer/Dryer Connections Only Located Where: \_\_\_\_\_

Water Heater:  Gas  Electric  Tankless  
What Size (Gallons): \_\_\_\_\_ Located Where: \_\_\_\_\_

A/C:  Central  Dual Zone  Tri-Zone  Window Unit

Air Filter Size(s) and Location(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Heat:  Hot Water  Baseboard  Dual Zone  Tri-Zone  Forced Air  Heat Pump

Fuel Heat:  Electric  Natural Gas  Propane  Oil

Sewer:  City Sewer  Septic Tank Date Last Cleaned: \_\_\_\_\_

Water:  City Water  Community Well  Individual Well

Location of Water Shut Off to House: \_\_\_\_\_

Location of Electrical Breakers: \_\_\_\_\_

**UTILITY COMPANIES**

	Name	Phone	Paid By Tenant
Electric:	_____	_____	<input type="checkbox"/>
Gas:	_____	_____	<input type="checkbox"/>
Propane:	_____	_____	<input type="checkbox"/>
Phone:	_____	_____	<input type="checkbox"/>
Water:	_____	_____	<input type="checkbox"/>
Sewer:	_____	_____	<input type="checkbox"/>
Trash:	_____	_____	<input type="checkbox"/>
Cable:	_____	_____	<input type="checkbox"/>

Satellite: \_\_\_\_\_   
Internet: \_\_\_\_\_

**EXTERIOR**

Lawn Maintenance:  By Tenant  By Landlord  Not Applicable

Is there an irrigation system?  Yes  No

Is there a swimming pool?  Yes  No If yes:  Above-ground  Below-ground

Swimming Pool Maintenance:  By Tenant  By Landlord  Not Applicable

Is backyard fenced in?  Yes  No

Mailbox Location: \_\_\_\_\_

Satellite Dish:  Already Installed  Approved, at Tenant's Expense

Does the HOA have any guidelines regarding the installation location? If so, what? \_\_\_\_\_

**COMMUNITY AMENITIES**

Clubhouse  Included in Rent  Tenant's Expense

Tennis Courts  Included in Rent  Tenant's Expense

Swimming Pool  Included in Rent  Tenant's Expense

Golf Course  Included in Rent  Tenant's Expense

Playground  Included in Rent  Tenant's Expense

**HOME WARRANTY**

Do you have a home warranty in place?  Yes  No

If yes, please provide:

Company Name & Phone: \_\_\_\_\_

Account Number: \_\_\_\_\_ Service Charge Amount: \_\_\_\_\_

You will need to add us on to this policy so we can call in warranty requests.

**PREFERRED CONTRACTORS**

Do you have any preferred contractors? If so, please provide their company name, phone number and the service they provide:

<u>Name</u>	<u>Phone</u>	<u>Service</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____