

**PROPERTY
INFORMATION SHEET**



Owner Name(s): _____ Date: ___/___/___
 Rental Address: _____ Date Available: ___/___/___
 Bronze Package: _____ Gold Package: _____ Platinum Package: _____
 Is the property currently "For Sale"? Yes No Realtor's Name: _____
 House Description: _____

Directions: _____
 Name of Homeowners Association: _____

Bedrooms: 1 2 3 4 5 Other _____ Square Footage _____
 Bathrooms: 1 2 3 Other _____ Year Built _____

- | | | | |
|--|---|---|--|
| Style
<input type="checkbox"/> Two Story or More
<input type="checkbox"/> Colonial
<input type="checkbox"/> Contemporary
<input type="checkbox"/> Ranch
<input type="checkbox"/> Split-Level
<input type="checkbox"/> Vintage/Historic
<input type="checkbox"/> Waterfront
<input type="checkbox"/> Other _____ | Terms
<input type="checkbox"/> 6 Months or Less
<input type="checkbox"/> 6 to 9 Months
<input type="checkbox"/> Lease Option
<input type="checkbox"/> Yearly
<input type="checkbox"/> Other _____ | Heating/Cooling
<input type="checkbox"/> Central Cool
<input type="checkbox"/> Central Heat
<input type="checkbox"/> No Cool
<input type="checkbox"/> No Heat
<input type="checkbox"/> Space Heat
<input type="checkbox"/> Window Unit
<input type="checkbox"/> Other _____ | Other Rooms
<input type="checkbox"/> Study/Den
<input type="checkbox"/> Family Room
<input type="checkbox"/> Foyer
<input type="checkbox"/> Great Room
<input type="checkbox"/> In-Law Suite
<input type="checkbox"/> Laundry/Utility Room
<input type="checkbox"/> Living Room
<input type="checkbox"/> Utility Room |
|--|---|---|--|

- | | | | |
|---|--|--|--|
| Construction
<input type="checkbox"/> Aluminum/Vinyl
<input type="checkbox"/> Brick
<input type="checkbox"/> Concrete Block
<input type="checkbox"/> Frame
<input type="checkbox"/> Hardie Board/Plank
<input type="checkbox"/> Metal
<input type="checkbox"/> Stucco
<input type="checkbox"/> Other _____ | Parking
<input type="checkbox"/> 1 Car Garage
<input type="checkbox"/> 2 Car Garage
<input type="checkbox"/> 1 Car Carport
<input type="checkbox"/> 2 Car Carport
<input type="checkbox"/> 1 Space/Unit
<input type="checkbox"/> 2 Space/Unit
<input type="checkbox"/> Driveway
<input type="checkbox"/> Open Parking Lot | Lot Size
<input type="checkbox"/> Up to .33 Acre
<input type="checkbox"/> .34 to .49 Acre
<input type="checkbox"/> .50 to .99 Acre
<input type="checkbox"/> 1 to 1.99 Acre
<input type="checkbox"/> 2 to 4.99 Acre
<input type="checkbox"/> 5 to 9.99 Acre
<input type="checkbox"/> 10 or More Acres | Floors
<input type="checkbox"/> Ceramic Tile
<input type="checkbox"/> Concrete
<input type="checkbox"/> Terrazzo
<input type="checkbox"/> Vinyl
<input type="checkbox"/> W/W Carpet
<input type="checkbox"/> Wood
<input type="checkbox"/> Other _____ |
|---|--|--|--|

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|--|---|--|---|
| Dining Area
<input type="checkbox"/> Dining L
<input type="checkbox"/> Breakfast Bar
<input type="checkbox"/> Breakfast Room
<input type="checkbox"/> Living/Dining Room Combo
<input type="checkbox"/> Eating Space in Kitchen
<input type="checkbox"/> Kitchen/Dining Room Combo
<input type="checkbox"/> Separate Dining Area | Showing
<input type="checkbox"/> Appointment Only
<input type="checkbox"/> Key in Listing Office
<input type="checkbox"/> Contact Owner
<input type="checkbox"/> Contact Tenant
<input type="checkbox"/> Vacant
<input type="checkbox"/> See Private Remarks | Sewer
<input type="checkbox"/> Septic
<input type="checkbox"/> Sewer

Water
<input type="checkbox"/> Metered Water
<input type="checkbox"/> Well | Hot Water
<input type="checkbox"/> Electric Water Heater
<input type="checkbox"/> Gas Water Heater
<input type="checkbox"/> Solar Water |
|--|---|--|---|

- | | | | |
|--|--|---|--|
| Restrictions
<input type="checkbox"/> No Pets
<input type="checkbox"/> Pets Negotiable
<input type="checkbox"/>
<input type="checkbox"/> No Students
<input type="checkbox"/> No Undergrads
<input type="checkbox"/> No Smokers
<input type="checkbox"/> Other _____ | Equipment/Appliances
<input type="checkbox"/> Burglar Alarm
<input type="checkbox"/> Dishwasher
<input type="checkbox"/> Disposal
<input type="checkbox"/> Washer
<input type="checkbox"/> Dryer
<input type="checkbox"/> Washer/Dryer Hookups Only
<input type="checkbox"/> Oven/Range
<input type="checkbox"/> Refrigerator
<input type="checkbox"/> Microwave
<input type="checkbox"/> TV Antenna
<input type="checkbox"/> TV Cable
<input type="checkbox"/> Other _____ | Exterior Miscellaneous
<input type="checkbox"/> Barbecue Pit/Grill
<input type="checkbox"/> Covered Patio
<input type="checkbox"/> Wood Deck
<input type="checkbox"/> Fenced Yard-Wood
<input type="checkbox"/> Fenced Yard-Chain Link
<input type="checkbox"/> Wooded Lot
<input type="checkbox"/> Open Patio
<input type="checkbox"/> Recreation Facility
<input type="checkbox"/> Screened Porch
<input type="checkbox"/> Storage Building
<input type="checkbox"/> Swimming Pool
<input type="checkbox"/> Sprinkler System
<input type="checkbox"/> Attic/Roof Ventilator
<input type="checkbox"/> Other _____ | Interior Miscellaneous
<input type="checkbox"/> Auto Garage Door
<input type="checkbox"/> Wet Bar
<input type="checkbox"/> Window Coverings
<input type="checkbox"/> Whole House Fan
<input type="checkbox"/> Fireplace
<input type="checkbox"/> Sauna/Hot Tub
<input type="checkbox"/> Laundry-Inside
<input type="checkbox"/> Insulated Windows
<input type="checkbox"/> Handicap Modifications
<input type="checkbox"/> Laundry-Outside
<input type="checkbox"/> Paddle Fan
<input type="checkbox"/> Storage Area
<input type="checkbox"/> Vaulted Ceiling
<input type="checkbox"/> Workshop
<input type="checkbox"/> Other _____ |
|--|--|---|--|

Keys Attached: _____ House _____ Mailbox _____ Other _____ Mailbox #: _____ Location: _____
 Neighborhood Amenities: _____
 Additional Comments: _____

Please attach copy of homeowners insurance policy for our file.

Owner _____
 Print _____ Sign _____ Date _____
Agent _____
 Print _____ Sign _____ Date _____
Referred By: _____

Agents Suggested Monthly Rent:	\$
Advertised Monthly Rental Rate:	\$
Minimum Rental Rate Acceptable:	\$
Deposit Amount :	\$
Other:	\$