## PROPERTY INFORMATION SHEET



#### Complete and Submit Property Information Sheet to Get Started

OWNER INFORMATION	
Rental Property Address:	
Name of Each Owner on Deed:	
Primary Contact Name:	
Primary Contact Number:	
Alternate Number:	
Email Address:	
Mailing Address for Owner:	
/	
Address to Mail 1099:	
(if different from above)	
Current on Mortgage	l NO; explain:
OCCUPANCY DETAILS	ERS GROUP
Property is Currently:   Occupant Name:   Vacant	□ Owner Occupied □ Tenant Occupied
Occupant Number:	. IVI
Occupant Email:	
When Will the Property be Available:	
IF SWITCHING MANAGEMENT CC Current Management Company:	OMPANIES
	Phone:
	YES NOT YET; If not, when will they be?
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ALARM □ YES □ NO	Company Name:			
	Company Number:			
Alarm Location:				
Arm Code:	Disarm Code:			
Security Code Word Unless	s Alarm is Activated:			
Will Alarm be Provided:	☐ YES; Owner Pays ☐ YES; Tenant Pays ☐ NO			
DESIRED LEASE TER	MS			
Desired Rent Amount:	\$			
Desired Lease Terms:	Minimum: Months Max: Months			
HOA/CONDO ASSOC	CIATION 🗆 YES 🗖 NO			
HOA/Condo Name:				
Management Company:				
Contact Name:	Phone:			
UTILITIES	TO Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Power:	Phone:			
Water:	Phone:			
Gas: Trash & Recycling Pick Up	Phone:Days:			
ADVERTISING DETA	AILS			
Property Type: ☐ House ☐	□ Townhouse    □ Condo; floor    □ Duplex    □ Other:			
Sq. Ft: # of S	Stories: # of Bedrooms: # of Bathrooms:			
Garage: □ None □1Car	□ 2 Car # of Assigned Parking Spaces: Parking Space #:			
Heat: ☐ Gas ☐ Electric	Central Air? ☐ Yes ☐ No Water Heater: ☐ Gas ☐ Electric			
Kind of Flooring in Property	y?			
	Community   No Comments:			
Office 321.733.3382	928 E New Haven Ave, Melbourne, FL 32901 Fax 321.733.0718			

Neighborhood Amenities:				
Any Special Features to A	dvertise:			
Pets Allowed? ☐ Yes ☐ 1	No Comments/Restriction	ons:		
APPLIANCES (check	all that will be provided v	vith rental)		
	Model	How Old	Warranty? Y/N	Expiration
☐ Refrigerator	/		<u> </u>	
□ Oven/Stove	/			
□ Dishwasher			<u> </u>	
☐ Microwave	7			
☐ Garbage Disposal	OVER	ne Cn	Omp.	
□ Washer	I OAAE	VD FLV	OUL	
☐ Dryer ☐ Other:	LTY &	MANA	GEMEN	
MAINTENANCE, HO	OME WARRANTY	& SERVICE CONT	RACT INFORMA	TION
Main Water Shut Off Loca	ation:			
Home Warranty: ☐ Yes	☐ No Company Name:			
Policy#:		*provid	e documentation show	ving coverage
Does Your Property Have	a Sprinkler System? If Yes	s, is it on City or Well W	Vater?	
If it is on a Timer, Provide	Times			
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Do You Have Any Service Contracts	that Will Continue with Rental: ☐ Yes ☐ No				
If yes, provide information for each b	pelow: (example: Pest Control, Lawn Maintenance)				
Service Contract Provider Name:					
Company Number:	Next Service Date:				
Service Frequency:	Comments:				
Service Contract Provider Name:					
Company Number:	Next Service Date:				
Service Frequency:	Comments:				
Any Repairs or Maintenance that Ne	eeds to be Done Prior to Renting? 🗆 Yes 🔲 No				
Who will be Completing the Work?					
When will the Property be Ready fo					
1					
KEYS (check which keys will be	provided & how many, the pre-filled ones are required):				
☐ Front Door <u>4</u>	☐ Back Door ☐ ☐ Side Door				
☐ Shed Door	☐ Crawl Space ☐ Mailbox Key2				
□ Alarm Fob	□ Parking Pass □ Pool Pass				
☐ Garage Remote	□ Garage Keypad Code:				
☐ Gate Code:					
*If TGRM has to make copies of key	rs, there will be a \$25 fee.				
PAPERWORK (Provide Comple ✓ Management Agreement ✓ W9	eted Documentation Listed Below with this Information Packet)				
✓ Owner ACH Authorization Page w/ Voided Check ✓ Specific Power of Attorney					
✓ Insurance Dec Page					
✓ HOA/Condo Rules & Regs, if applicable					

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✓ Current Lease, if taking over property with tenant currently in place

#### LANDLORD SIGNATURES

I have read and understand and agree to all terms as presented in the Towers Group Realty & Management, LLC Agreement and Homeowners Handbook.

I agree that terms of the Towers Group Realty & Management, LLC Agreement and Homeowners Handbook can be changed by Towers Group Realty & Management, LLC at any time by written notification with 60 days notice.

Signature:			Date:
Signature:		-11	Date:
Signature:			Date:
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