

### **Owner Information**

OWNER'S NAME:				
OWNER'S MAILING ADDRESS: _				
CITY:	STATE:		_ ZIP CODE: _	
MOBILE PHONE #1:	SILE PHONE #1: MOBILE PHONE #2:			
PRIMARY EMAIL:				
	Insurance Info	rmation		
COMPANY:		_AGENT:		
ADDRESS:				
POLICY #:		AMOUNT OF INSU	RANCE:	
DOES YOUR INSURANCE ALLOV	V DOGS ON THE PREMISES?	☐ YE:	S 🗆 n	10



# ALL OWNERS NEED TO PROVIDE A COPY OF THEIR DECLARATION PAGE TO SECURE DOOR PROPERTY MANAGEMENT.

### **Description of Property**

Single Family  Multi-Family  Duplex  Condo	
Square Footage Bedrooms Bathrooms Year Built	
Garage Port: Single Double 3/Car	
Lanai  Formal Dining Room  Florida Room	
Patio Den Den Shed D	
Fence ☐ Great Room ☐ Pool ☐ Screened? Yes ☐ No ☐	
Fireplace □ Nook □	
Formal Living Room  Inside Utility Room	
Flooring Type(s): Carpet  Title  Wood  Other	
Other Descriptions:	
	_
	_
	_



## **Personal Property Included**

Range
Refrigerator
Dishwasher
Microwave
Garbage Disposal
Washer/Dryer
Window Coverings: Verticals $\square$ Drapes $\square$ Blinds $\square$ none $\square$
Ceiling Fan(s) Amount:
Swimming Pool: Solar Heat  Electric  None
Spa/Hot Tub
Landscaping: Owner paid $\square$ Tenant Paid $\square$
Cable Service Home is Equipped to Provide:
Internet Service Home is equipped to Provide:
Electric Service Provider:
Water/Sewer Service Provider:
If City Water/Sewer, Current Account Number:
Septic
Trash Pickup
Pest Control
Irrigation System



### Pets

Pets Allowed? Yes □ No □					
If yes, how many?					
Type of pets:					
Additional Contact Information					
Additional Information You'd Wish t	:o Provide				