



Property Owner's Data Sheet

- 1). Property Address _____
- 2) Primary Owners Name: _____
- 3) Secondary Owners Name: _____
- 4) Primary Owners Tax ID# _____ - _____ - _____
- 5) Home Phone: (____) _____
Work Phone: (____) _____
Fax Number: (____) _____
E-Mail Address: _____
Postal Address: _____
- 6) Preferred Method of Communication:
____ Phone ____ Fax ____ E-Mail ____ Postal
____ Other: _____
- 7) Property Zip Code: _____ Heated Sq. Ft.: _____
Map Grid: _____ Total Sq. Ft.: _____
Subdivision Name: _____ HOA Approval Required: Y or N
HOA Phone #: _____ Gated Community Y or N
Entrance Gate Code: _____ Year Built _____

8). Type of Property:

- A) House B) Condo C) Town Home
D) Duplex E) Triplex F) Quad

9). Floor Plan:

- A) Single Story B) Split-Level C) Two Story
D) Split-Planned E) Other: _____

10). Exterior Appearance:

- A) Wood Siding B). Aluminum Siding C) Brick
D) Cinder Block E) Stucco F) Corner Lot
G) Waterfront Lot H) Water view Lot I) Other: _____

11) Area Location:

- A) Northwest B) Northeast C) Southwest
E) Southeast F) Seminole Co. G) Volusia Co.

12) Number of Bedrooms:

- A) 1 B) 2 C) 3 D) 4 E) 5
F) ____: Extra room/den/loft/office/enclosed garage/guest quarters; may be used as additional bedroom.

13) Number of Bathrooms:

- A) 1 B) 1 ½ C) 2 D) 2 ½ E) 3 F) _____

14) Bathroom Extras:

- A) Roman Tub B) Jacuzzi Tub C) Double Vanity D) Glass Shower
E) Private Toilet Rm F) _____ Other; _____

15) Living Room:

- A) Living Room B) Formal Living Room C) Living / Family Room Combo

16) Dining Room:

- A) Dining Area B) Formal Dining Room C) Kitchen Dining Area
E) Breakfast Bar F) _____ Other: _____

17) Kitchen:

- A). Efficiency Kitchen B) Kitchen C) Large Kitchen E) Country Kitchen
F). Kitchen with Island G) _____ Other: _____

18) Appliances Included:

- A) _____ Stove: Electric or Gas (circle one)
B) _____ Refrigerator – With Icemaker or Icemaker & Water (circle one)
C) _____ Dishwasher – Built In or Portable (circle one)
D) _____ Microwave – Built In or Portable (circle one)
E) _____ Washer
F) _____ Dryer Electric or Gas (circle one)
G) _____ Other; _____

19) Laundry Facilities:

- A) Laundry Room B) Kitchen Laundry Area C) Garage Laundry
D) Closet Laundry E) Stackable Laundry Area F) Other; _____

20) Flooring:

- A) Carpet and Vinyl Combo B) Carpet and Tile Combo
C) All Carpet D) All Tile
E) Hardwood F) Other: _____

21) Carpet Color:

- A) Beige B) Blue C) Brown D) Gold E) Green
F) Rust G) Mauve H) Other; _____

22) Parking Facilities:

- A) Double Car Garage B) Single Car Garage C) Carport
D) Assigned Parking E) 3 Car Garage F) Street Parking
G) Electric Garage Door Opener = YES or NO (circle one)
H) Assigned Parking – # of Spaces _____ / Parking Space #'s Assigned _____

23) Heating & A/C:

- A) Central Electric B) Central Gas C) Oil Heat/Central A/C
D) Gas Heat & Cent Air E) Window A/C Units

B) Swimming Pool/Hot Tub Service:

1. The property owner hereby agrees that they will provide OR ask Rental Home Management Services, Inc. to provide a professional pool service to maintain the swimming pool/hot tub, (including chemicals, cleaning and repairs) at the property owners expense.

_____YES or _____NO

C) Pets:

1. The property owner hereby agrees that pets may be accepted, provided additional pet fees are collected in addition to the security deposit. The security deposit and pet fees (if necessary), will be used to correct any pet damage.

_____YES or _____NO

2. The property owner hereby request that no pets be considered.

_____YES or _____NO

Note: Property owner acknowledges they understand that restriction of pets greatly reduces the number of possible renters for their property.

D). Pest Control:

1. The property owner hereby agrees that they will provide OR ask Rental Home Management Services, Inc. to provide a professional pest control service company to treat the “**Exterior**”, the lawn at regular intervals, at the property owners expense.

_____YES or _____NO

2. The property owner hereby agrees that they will provide OR ask Rental Home Management Services, Inc. to provide a professional pest control company to treat the “**Interior**” of the property at regular intervals, at the property owners expense.

_____YES or _____NO

E) Keys & Remotes:

- A) Number of Keys turned over to Manager _____
- B) Number of Garage Remotes given to Manager: _____
- C) Number of Mail Box Keys given to Manager: _____

F) Warranty Information:

A) Property Owners have no appliance or fixture warranties,
(other than home owners insurance policy).

B) Property Owners have a “New Home Warranty” from Builder:

Name of Builder: _____

Policy #: _____

Phone #: _____

Appliances or items covered: _____

C) Property Owners have purchased an appliance or fixture warranty:

Name of Warrantee Company: _____

Policy #: _____

Phone #: _____

Appliances or items covered: _____

D) Manager was provided a copy of warrantee referenced in B) or C) above?

_____ YES or _____ NO

E). Any other special instructions: _____

29) Rental Proceeds Payments:

- A) _____ - Property owners desire rental proceeds to be direct deposited onto their bank account.
- B) _____ - Property owners desire mortgage payments to be made from rental proceeds. This is subject to adequate funds available in property owners account, (see property owners handbook for further information)
- C) _____ - Property owners desire HOA payments to be made from rental proceeds. This is subject to adequate funds available in property owners account, (see property owners handbook for further information)
- D) _____ - Other; Property owner desires the following items be paid from rental proceeds: _____

30) Insurance Information:

Name & Phone Number of Homeowners Insurance Company:

Policy #: _____ Phone: _____

31) Market Survey: The property owners found our company through which of the following:

- A) Yellow Pages B) Internet C) Friend D) Other Property Owners
- E) Sign F) Other: _____

G) Realtor Referral - If Realtor Referral, please provide name of referring agent so that we can thank them for referring our firm:

32) Rental Range: Rental Home Management Services, Inc. will use it's best efforts to lease or rent the property at a rental rate of \$_____ per month. Manager is given the right to lease or rent as low as \$_____ per month. Manager will present all other offers for Property Owners consideration.

I/We the property owners do hereby acknowledge the information in the Property Data Sheets to be accurate:

Date: ____/____/_____

Property Owner

Property Owner

Listing Agent – Rental Home Management Services, Inc.

Revised 2/1/5