

Property Address _____



OWNER INFORMATION FORM

Owner Information:

Owner Name(s): _____

Owner Address: _____

Contact Phone Number(s): _____

Contact e-mail address: _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

Keys will be made available by:

Mail Delivery

Personal Delivery

Management Pick-up

Management to pick up at (address): _____

Maintenance for the Property will be provided by/through:

____ Management Company Vendors

____ Home Warranty Protection Plan

____ Owner/Other

If Home Warranty Protection Plan in place, please complete the following:

Warranty Carrier: _____

Phone: _____

Policy Number: _____

Management Company will be responsible for paying the following home expenses on behalf of the owner:

Mortgage Payment

Water/Sewer Bills

HOA Payment

Insurance Payments

Vacant Utilities

Lawn/Maintenance Vendors –
while vacant

Property Address _____

Owner Method of Draw:

E-Payment Name of Financial Institution: _____
Bank Routing Number: _____
Bank Account Number: _____

Check Mailed to: _____

No Owner Draw – Hold Funds

Please provide any additional questions/comments below:

Owner Signature(s): _____

Date: _____