

Management Property Questionnaire

Property Address						
How long have you owned this property?						
Have you ever occupied this property?						
What is the current occupancy status? Owner occup	Vacant	Tenant				
What is the current or previous rent (if applicable)?						
What is your target rent?						
Type of ownership:						
IndividualPartnershipLLC/Cor	poration	Estate	Other			
Please indicate the approximate age of the following:						
Main Structure	0	ven				
Roof	Di	shwasher				
A/C Condenser (outside)	Ra	Range				
Unit #2 if applicable	G	Garbage disposal				
A/C Evaporator Coil (Inside)	Re	Refrigerator				
Unit #2 if applicable	W	asher				
Heater	Dr	yer				
Unit #2 if applicable	M	Microwave				
Water Heater(s)						

Please indicate if any of the following are present in your property:						
	Fireplace		A/C window or wall units		Swimming Pool	
	Garage door		Sprinkler System		Hot Tub	
	Automatic gate		Generator		Deck	
	Alarm system		Jetted/Whirlpool Tub		Outdoor grill/kitchen	
	Ice maker		Gutters		Community elements (pool/clubhouse)	
Please in	dicate it the tollow	ing services	are present, and the prov	ider		
□ E	lectricity-					
	`ac					
□ v	Vater					
□ S	ewer-					
□ Т	rash-					
	Monitor Alarm					
Do you currently have any service agreements or warranties in place for HVAC, mechanical or Home Appliances? Has your property ever taken on water from Flooding or Sewer Back up?						
Do you currently maintain Flood Insurance?						
Please describe any recent updates or repairs made to Roof, Plumbing or Electrical Systems:						
Owner na	ama					