



# New Property Intake

Complete each line - Use n/a if necessary

## Property Address

Address: \_\_\_\_\_  
Street Address Apartment/Unit #

\_\_\_\_\_

City State ZIP Code

## Owner Information

Full Name: \_\_\_\_\_ Date Service to Begin: \_\_\_\_\_  
First Last M.I.

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Secondary Contact

Full Name: \_\_\_\_\_  
First Last M.I.

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Property Details

Does the property have an existing tenant? YES  NO

Property has a Home Owners Association? YES  NO

HOA Name: \_\_\_\_\_ HOA Phone Number : \_\_\_\_\_

- Please provide a copy of your HOA community rules and regulations.

Monthly Rent Rate: \_\_\_\_\_ Security Deposit Amount : \_\_\_\_\_ Application Fee: \_\_\_\_\_

Last month's rent required? YES  NO

Qualifying Criteria: \_\_\_\_\_

Pets Allowed? YES  NO  If yes, Pet Fee: \_\_\_\_\_

# of Bedrooms: \_\_\_\_\_ # of Bathrooms : \_\_\_\_\_ Sq Footage: \_\_\_\_\_  
Year Built: \_\_\_\_\_ Community Name : \_\_\_\_\_ Date Available: \_\_\_\_\_

Elementary School: \_\_\_\_\_ Middle School: \_\_\_\_\_ High School: \_\_\_\_\_

Dwelling

Type? Single Family  Townhouse  Condo  Duplex  Multi Plex  Manufactured Hm  Mobile Hm

**Bedroom Description**

Master Bedroom #1 (check all that apply)

Upstairs  Downstairs  Separate Entrance  Walk-in Closet  Closet  Balcony  Window Coverings

Other Bedroom #2 (check all that apply)

Upstairs  Downstairs  Separate Entrance  Walk-in Closet  Closet  Balcony  Window Coverings

Other Bedroom #3 (check all that apply)

Upstairs  Downstairs  Separate Entrance  Walk-in Closet  Closet  Balcony  Window Coverings

Other Bedroom #4 (check all that apply)

Upstairs  Downstairs  Separate Entrance  Walk-in Closet  Closet  Balcony  Window Coverings

**Bathroom Description**

Master Bedroom #1 (check all that apply)

¼ Bath  Full Bath  Separate Shower & Tub  Double Sinks  No Master Bath

Other Bedroom #2 (check all that apply)

½ Bath  ¾ Bath  Full Bath  Separate Shower & Tub  Double Sink

Other Bedroom #3 (check all that apply)

½ Bath  ¾ Bath  Full Bath  Separate Shower & Tub  Double Sink

Other Bedroom #4 (check all that apply)

½ Bath  ¾ Bath  Full Bath  Separate Shower & Tub  Double Sink

**Appliance/ Other Description**

Kitchen Appliance (check all that apply)

Oven/Range  Separate Oven & Range  Two Ovens  Refrigerator  Ice Maker

Dishwasher  Microwave  Disposal  Closet Pantry  Walk-in Pantry

Laundry (check all that apply)

Washer  Gas Dryer  Electric Dryer  Stacked W/D  Hookups  Community Laundry  No Laundry

Fireplace (check all that apply)

Wood Burning Fireplace  Gas Fireplace  Wood Stove  No Fireplace

**Yard/Outdoor Description**

Yard Details (check all that apply)

Grass in Front  Bushes in Front  Trees in Front  No Landscaping in Front

Grass in Front  Bushes in Back  Tree in Back  No Landscaping in Back

Yard Irrigation (check all that apply)

Sprinklers in Front  Sprinklers in Back  Pressurized Irrigation  No Sprinklers  Tier 1 to Winterize  Owner to Winterize

Location of Main Valve:

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Pool (check all that apply)

Private Pool  Community Pool  No Pool

Private Hot Tub  Community Hot Tub  No Hot Tub

### External Community Features Description

Community Details (check all that apply)

Child's Play Area  Gated  Clubhouse  Gazebo  Basketball Court  Volleyball Court

Tennis Court  Exercise/Fitness Rm  Pond  Fountain  BBQ Grill  Conference Rm

### Heating and Cooling Description

Heating (check all that apply)

Electric Forced Air  Gas  Electric Heat Pump  Wall/Floor Heat  Radiant Heat

Location of Furnace:

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Furnace Filter Size:

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Cooling (check all that apply)

Central A/C  No A/C  Window/Wall Unit  Wall/Floor Heat  Radiant Heat

Water Heater (check all that apply)

Electric Water Heater  Gas Water Heater  Water Heater Location: \_\_\_\_\_

### Parking Details

Attached Garage  Detached Garage  Carport  Street Parking Only  Driveway Parking Only  RV Parking

# of Garage Spaces: \_\_\_\_\_ Garage Key Pad # : \_\_\_\_\_ # of Carport Spaces: \_\_\_\_\_

**Services Required**

- Management Service (10% of Collected rent) YES  NO
- Marketing/Leasing Services (half of first month's rent) YES  NO
- Preventive Maintenance Program? YES  NO
- Home Watch Services? YES  NO
- Suggested Marketing Services?  
(Cost – please remit payment) YES  NO

Included: Place for Rent Sign in Yard, List on Website, Share with Network of Alliances.

**Notes:**

**Disclaimer and Signature**

*I believe that the statements I have made are true and correct. I hereby authorize Tier 1 Property Management to confirm information provided on this form.*

Owner Name: \_\_\_\_\_

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Tier 1 Property Management Signature: \_\_\_\_\_ Date: \_\_\_\_\_