

OWNER NAME: \_\_\_\_\_  
PROPERTY ADDRESS: \_\_\_\_\_



## **OWNER PROPERTY DETAILS**

*USE "NA" OR LEAVE BLANK FOR ANY FIELDS THAT DON'T APPLY*

1. What is the name, address and phone number of your Home Owner Association AND/OR HOA Management Company?

\_\_\_\_\_

2. What is the name and phone number of your electrical provider?

\_\_\_\_\_

3. What is the name and phone number of your water provider?

\_\_\_\_\_

4. What is the name and phone number of your sewer utility?

\_\_\_\_\_

5. What is the name and phone number of your natural gas provider?

\_\_\_\_\_

6. What is the name and phone number of your garbage/recycling vendor?

\_\_\_\_\_

7. What day of the week is garbage/recycling pickup for the property?

\_\_\_\_\_

8. If the property has dumpsters, where are they located?

\_\_\_\_\_

9. What is the name and phone number of your lawn care provider?

\_\_\_\_\_

10. What is the name and phone number of your pest control provider?

\_\_\_\_\_

11. What is the name, address and phone number(s) of your internet provider?

\_\_\_\_\_

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## PROPERTY SPECIFICATION LIST

1. HOME/UNIT IS OK TO LEASE PER HOA CC&R: YES NO
2. IS THIS UNIT OCCUPIED: YES NO
  - a. IF OCCUPIED, CURRENT RENT: \_\_\_\_\_
  - b. IF OCCUPIED, LEASE END DATE: \_\_\_\_\_
  - c. DATE UNIT CAN BE LEASED: \_\_\_\_\_
3. APPROVED MINIMUM LEASE LENGTH \_\_\_\_\_
4. DESIRED RENT/month: \$ \_\_\_\_\_
5. REQUIRED DEPOSIT: \$ \_\_\_\_\_
6. ANY HOA/COMMON AREA FEES NOT INCLUDED IN RENT: \_\_\_\_\_
7. ARE FOR RENT SIGN AND LOCKBOX ALLOWED: YES NO
8. TOTAL SQ FT: \_\_\_\_\_
9. NUMBER OF BEDROOMS: \_\_\_\_\_
10. NUMBER OF BATHROOMS: \_\_\_\_\_
11. GARAGE SPACES: \_\_\_\_\_
12. PARKING SPACE #(S): \_\_\_\_\_
13. PARKING RESTRICTIONS: \_\_\_\_\_
14. HOW MANY: GARAGE REMOTES: \_\_\_\_\_ HOUSE KEYS: \_\_\_\_\_  
MAIL KEYS: \_\_\_\_\_ GATE REMOTES/CODE: \_\_\_\_\_ AMENITY KEYS: \_\_\_\_\_
15. ARE PETS ALLOWED: YES NO
  - a. IF YES, ANY RESTRICTIONS (number or breeds): \_\_\_\_\_
16. IS A PET DEPOSIT REQUIRED: YES NO
  - a. IF YES, IN WHAT AMOUNT: \_\_\_\_\_
17. IS SMOKING ALLOWED IN UNIT: YES NO
18. MAILBOX #: \_\_\_\_\_
19. HEAT TYPE: GAS ELEC OTHER: \_\_\_\_\_
20. AIR CONDITION TYPE: CENTRAL WALL NONE
21. ANY UTILITIES INCLUDED IN RENT: \_\_\_\_\_

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22. GARBAGE INCLUDED IN RENT: YES NO

23. CABLE INCLUDED IN RENT: YES NO

24. INTERNET INCLUDED IN RENT: YES NO

25. LAWN CARE INCLUDED IN RENT: YES NO

26. IS THERE A GYM: YES NO

27. IS THERE A CLUBHOUSE: YES NO

28. IS THERE A POOL: YES NO

a. IF YES, IS POOL PRIVATE COMMUNITY PUBLIC

b. IF PRIVATE, IS POOL CARE INCL IN RENT: YES NO

29. DISPOSAL INCLUDED: YES NO

30. STOVE INCLUDED: YES NO

31. MICROWAVE INCLUDED: YES NO

32. REFRIGERATOR INCLUDED: YES NO

33. DISHWASHER INCLUDED: YES NO

34. WASHER & DRYER UNITS INCLUDED: YES NO

35. WASHER & DRYER HOOKUPS: YES NO

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## **PROPERTY MANAGEMENT CHECKLIST**

1. \_\_\_\_ Sign a Property Management Agreement with SHC Property Management
2. \_\_\_\_ Complete the New Client: Property Management Services Form
3. \_\_\_\_ Complete the Owners Property Details List
4. \_\_\_\_ Complete the Property Specification List
5. \_\_\_\_ Provide contact information for any current tenants
6. \_\_\_\_ Provide copy of lease and applications for any current tenants if applicable
7. \_\_\_\_ Provide copy of HOA Rules and Regulations if applicable
8. \_\_\_\_ Provide keys, fobs and remotes to each unit, gate, mailbox, pool, gym, storage, and garage
9. \_\_\_\_ Contact your insurance agent/company and have SHC Property Management listed on your policy as an *additional insured*. This covers us in any unforeseen circumstances including personal injury to our staff members while on your property. Also, be sure you are covered for having renters.