



Owner / Property Information

Rental Property Address

Owners Name _____ Social Sec# _____
 Owners Name _____ Social Sec# _____
 Emergency Contact _____ Phone# _____

Owners Address

Home Phone _____ Work Phone _____
 Cell Phone _____ E-Mail _____

Proceeds To: _____ Balance Go To: (Circl One)
 Pay Property Bills: Yes NO (Circl One) Owners Directly
 Owners Savings or Checking Account

Account Information:

Institute Name _____ Address _____

Account # _____ Routing # _____

Phone# _____ Contact Name _____

HomeOwners Association / Condo: _____ Fees: _____

Name _____ Phone _____ Paid: (Circl One)

Address _____ Monthly / Quarterly / Annually

Water Bill Included in (Circl One) _____ Trash Bill Included in (Circl One)

HOA/ Condo Fee/ Taxes / Escrow / Separate _____ HOA/ Condo Fee/ Taxes / Separate

Water Co _____ Trash Co _____

Homeowners / Landlord Insurance Company:

Name _____ Address _____

Phone _____ Policy # _____

Agent

Local / Emergency Contact & Instruction: _____



Owner / Property Bill Pay Information

Please List all Bills to be paid by Manager and provide copies of the current or last months paper or electronic bill.

1. Bill Name		Amount
Payee		Due Date Yes / No
Account Number		Internet Access
Login: User Name	Password	Security Question / Answer

2. Bill Name		Amount
Payee		Due Date Yes / No
Account Number		Internet Access
Login: User Name	Password	Security Question / Answer

3. Bill Name		Amount
Payee		Due Date Yes / No
Account Number		Internet Access
Login: User Name	Password	Security Question / Answer

4. Bill Name		Amount
Payee		Due Date Yes / No
Account Number		Internet Access
Login: User Name	Password	Security Question / Answer

5. Bill Name		Amount
Payee		Due Date Yes / No
Account Number		Internet Access
Login: User Name	Password	Security Question / Answer

****Please print additional copies for more then 5 bills.