



**PMI PREMIER**

**OWNER INFORMATION**

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

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Work Phone #: \_\_\_\_\_

Home Phone #: \_\_\_\_\_

Cellphone #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Name on Check (Banking Information): \_\_\_\_\_

Tax ID Number OR Social Security: \_\_\_\_\_

Who can we thank for referring you? (If any) \_\_\_\_\_

Requested Portfolio Minimum (If any) \$ \_\_\_\_\_

**Current Tenant Information (If applicable)**

Name (s): \_\_\_\_\_

Phone #(s): \_\_\_\_\_

Date Available: \_\_\_\_\_



## PMI PREMIER

PROPERTY INFORMATION SHEET (Fill out one info sheet PER property.)

Address of the property: \_\_\_\_\_

Target Rent per Month: \_\_\_\_\_ to \_\_\_\_\_

Target Deposit \_\_\_\_\_ Neighborhood: \_\_\_\_\_

Property Type (Circle one): House Town-Home Duplex Apartment Condo

Year Built: \_\_\_\_\_ Finished Sq. Footage: \_\_\_\_\_ Total Sq. Footage: \_\_\_\_\_

Total Bedrooms: \_\_\_\_\_ Upstairs \_\_\_\_\_ Main Floor \_\_\_\_\_ Basement \_\_\_\_\_

Total Bathrooms: \_\_\_\_\_ Upstairs \_\_\_\_\_ Main Floor \_\_\_\_\_ Basement \_\_\_\_\_

Total Living areas: \_\_\_\_\_ Upstairs \_\_\_\_\_ Main Floor \_\_\_\_\_ Basement \_\_\_\_\_

Basement: NONE FINISHED PARTIALLY FINISHED

Total Number of Floors: \_\_\_\_\_

Parking (Circle all the apply):

1 Car Garage	4 Car Garage	Slab Parking	Street Parking
2 Car Garage	Carport	Reserved Parking: _____	
3 Car Garage	RV Parking	Assigned Parking: _____	

Please Circle/ Check all that apply to your property:

Evaporative Cooler	Living Room	Jetted Tub
Laundry Hook-ups/Room	Theater Room	Garden Tub
Air Conditioning	Dishwasher	Separate Tub/Shower (Mstr Bth)
Electric / Gas Heat	Microwave	Washer / Dryer Included
Walk-In Closets	Fridge	Loft Area
Walk-In Pantry	Oven	Ceiling Fans
Tile Floors	Double Oven	Alarm System
High / Vaulted Ceilings	Disposal	Fireplace
Dining Room	Granite Countertops	Hardwood Floors
Family Room	Concrete Countertops	Cable Ready
Office Space	Stainless Steel Appliances	Cold Storage
Balcony	Central Vacuum	Custom Blinds/Shutters
Water Softener	Fitness Center	Pool
Patio	Deck	Porch
Stainless Steel Appliances	Carpet	

Counter Top Type: \_\_\_\_\_

Pets Allowed: Yes \_\_\_ No \_\_\_

Smoking Allowed: Yes \_\_\_ No \_\_\_

Fully Landscaped Yard: Yes \_\_\_\_\_ No \_\_\_\_\_

Fully Fenced Yard: Yes \_\_\_ No \_\_\_ Partial \_\_\_ If so, where?: \_\_\_\_\_

Sprinkler System: Y N Automatic? Y N



## PMI PREMIER

Please Circle all Utilities to be paid for by **TENANT**: Electric Gas Water Sewer Trash

Who is responsible for yard care when home is vacant: Owner \_\_\_ PMI \_\_\_ Tenant \_\_\_ HOA \_\_\_

Who is responsible for yard care when home is rented: Owner \_\_\_ PMI \_\_\_ Tenant \_\_\_ HOA \_\_\_

### Utility Companies:

Electric: \_\_\_\_\_

Gas: \_\_\_\_\_

Water/Sewer/Trash: \_\_\_\_\_

Mailbox #: \_\_\_\_\_ Mailbox Keys: \_\_\_\_\_

House Keys: \_\_\_\_\_ Garage Door Openers: \_\_\_\_\_ Garage Door Code \_\_\_\_\_

Is your home part of an HOA or have a Home Warranty? Yes \_\_\_ No \_\_\_ Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Email/ Website: \_\_\_\_\_

HOA fees are included in rent? **Y** **N**

What neighborhood amenities are included?

\_\_\_\_\_  
\_\_\_\_\_

How do residents gain access to these amenities?

\_\_\_\_\_  
\_\_\_\_\_

Please list any other amenities/ details you would like placed in your ad: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Property will be ready and available for lease on: \_\_\_\_\_

**\*Please be sure that all information on this sheet is correct and accurate as it will be used for all advertising, etc.**