



Central Texas

Property

Management, LLC

PROPERTY INFORMATION SHEET

Property Address:

Owner is to complete this form to the best of his or her knowledge.

Security System:

Owners are still liable for any security contracts that they have set up with their alarm company.

Security System	Owned?	Leased?
Security Code	Name of Company	
Phone #	Monthly Fee	

Garage Door Opener:

# Openers:	# Remotes
Garage Code:	Model:
# Garage Keys:	
# Key Fobs	

Home Warranty:

Do you have a warranty on the home?	YES	NO
Company Name		
Contract #		
Policy Exp Date		
Phone #		

Central Texas Property Management, LLC will not use a Home Warranty Company for an emergency work order such as leaking water heater, no air conditioning in temps above 90 degrees or no heat in temps below 50 degrees or other work order that we deem may affect the health and/or safety of a resident if not completed on an emergency timeline.

Keys and Utilities:

What date may we begin showing the property to prospective residents: _____

What date will you be giving us keys to the property: _____

All utilities must remain on in the owner's name until the property is occupied by the new resident. If the utilities are disconnected, Central Texas Property Management may have to turn on the utilities at the owner's expense.

of Bedrooms: _____ # of Full Baths: _____

of Powder rooms: _____ # of Living Areas: _____

Dining Areas: _____ #of Dens/Study/Ofc _____

Other, i.e. shed, laundry, etc: _____

Year Built: _____ Square Footage: _____ Floor Plan: _____

The Property has the items marked below (Mark Yes (Y), No (N), Unknown (U).)

Item	Y	N	U	Additional Information
Central Heat/Air Conditioning				___ Electric, ___ Gas, ___ Heat pump
Fireplace/Chimney				___ Woodburning, ___ Gas if yes, type:
Garage				# Spaces:
Exterior Building				Describe:
Patio/Deck front				___ Covered, ___ Not Covered
Built In Outdoor Grill				Location: _____, Type:
Inground Sprinkler System				Above Ground Backflow ___ Yes, ___ No
Septic/On-Site Sewer Facility				Type:
Water Heater				Type ___ Electric, ___ Gas
Water Softener				Type:
Washer Dryer				Brand: _____ Type: ___ Elec, ___ Gas
Washer Dryer Connections				Location: _____ Type: ___ Elec, ___ Gas
Hard Wired Smoke Alarms				List Locations:
Battery Operated Smoke Alarms				List Locations:
Hard Wired Carbon Monoxide Det.				List Locations:
Batter Battery Operated Carbon ide Det.				List Locations:
Refrrr KITCHEN: Refrigerator				Brand: _____ Filter Type:
Electric Stove/Oven Combination				Brand:
Gas Stove/Over				Brand:
Electric Stove Top				Brand:
Gas Stove Top				Brand:
Built in Separate Oven				Number: _____, Describe

Built in Microwave				Brand:
Dishwasher				Brand:
Built in Wine Refrigerator				Brand:
Other Kitchen Equipment				Describe:
Kitchen Flooring				Describe:
Dining Room Flooring				Describe:
LIVING: Living Room #1 Flooring				Describe:
Living Room #2 Flooring				Describe:
Office/Den Flooring				Describe:
BEDROOMS: Master Bedroom Flooring				Describe:
1 st Minor Bedroom Flooring				Describe:
2 nd Minor Bedroom Flooring				Describe:
3 rd Minor Bedroom Flooring				Describe:
4 th Minor Bedroom Flooring				Describe:
BATHROOMS: Master Bathroom Flooring/Fixtures				Describe:
1 st Minor Bathroom Flooring/Fixtures				Describe:
2 nd Minor Bathroom Flooring/Fixtures				Describe:
3 rd Minor Bathroom Flooring/Fixtures				Describe:
UTILITY INFO: City Water				Provided By:
Municipal Water				Provided By:
Private Water				Provided By:
Propane				Provided By:
Natural Gas				Provided By:
Electric				Provided By:
Other Utility				Describe:

MISC INFO: Home Owners Association Membership				Contact:
Mail Box				Describe Location/Type:
Type and Age of Roof				Describe:
Interior Window Coverings				Describe:
Exterior Window Coverings				Describe:
Exterior Water Shut Off Valve				Location:
Exterior Gas Shut Off Valve				Location:
Electrical Breakers				Location:
Heating/Cooling Filters				Location: Size(s):
Cable Ready				Describe Service Provider(s)
Internet Ready				Describe Service Provider (s)
Other Services to Property				Describe:
Privacy Fencing				Type:
Other				Describe:
Other				Describe:
Other				Describe:

Section 2: Owner's Check List Before Turning Over Home

- A. Is the house number visible from the street? Yes No
- B. Do all bedrooms have a working smoke alarm? Yes No
- C. Can all exterior doors be unlocked from the inside without a key?
 Yes No
- D. Are all light bulbs in place and working order? Yes No
- E. Are all blinds which are being left behind in working order, free from damage? Yes No
- F. Are all windows, storm windows and screens in place, and free from damage? Yes No
- G. Do all windows open and lock properly and remain in position when open? Yes No
- H. Are all shrubs trimmed to a height no taller than window level?
 Yes No
- I. Will the yard be mowed and trimmed immediately before you move out? Yes No
- J. Are all gutters properly attached, working and free of debris?
 Yes No
- K. If there is a fireplace, when was it last cleaned? _____
- L. Roof free of missing shingles? Yes No
- M. Exterior free of peeling paint, openings, rot, etc? Yes
 No

Section 3: Are you aware of any item, equipment, or system in or on the Property that is in need of repair: ___Yes___No, If Yes, explain:

Section 4.

A. Are you aware of the following (if yes, describe):

Is your property subject to control by a Homeowners Association:

_Yes, _No, if Yes – Describe below:

If yes, you will continue to be responsible for the payment of any association dues and agree to make us (Agent) aware of any changes, requirements, violations and/or notices in a timely manner and by submitting a copy of the same via email or facsimile immediately upon receipt.

B. Are there any special instructions for the operation of the HVAC system: _Yes, _No, if Yes – Describe below:

C. Are there any service contracts, such as a home warranty, pest control, lawn maintenance or security system service contracts that you will continue to maintain _Yes_ No, if Yes – Describe below and provide a copy of each contract with this application.

D. Are there currently any lawsuits, or other legal proceedings directly, or indirectly affecting the property (including divorce, bankruptcy or foreclosure proceedings)? _Yes, _No, If Yes – Describe below in detail:

E. Are you current on all mortgage payments? _____Yes _____No. If No, please provide further info below.

F. Are you aware of any condition on the Property which materially affects the health or safety of an individual? _Yes, _No, If yes – Describe in detail:

G. Are there currently any notices of violations of deed restrictions, homeowner's association rules or city or governmental ordinances affecting the condition or use of the property: _Yes, _No, If Yes – Describe below in detail:

Section 4. Other Information.

Please provide any special care instructions for finishes, fixtures, appliances and improvements in your home that you would like the Tenant to be aware of below:

Section 5: Make Ready/100% Clean Guarantee:

We have discussed our 100 % Clean policy with you during your initial home visit. Our experience has been that after the work and stress of moving out, many owners are too tired to clean the property thoroughly. We recommend considering a professional cleaning company. You are free to use any company as long as they

guarantee that they will pass our inspection or we will be happy to recommend a company that we use.

The following items need to be completed before the residents move in:

1. Carpet professionally cleaned
2. Pet enzyme treatment for carpets if pets were ever on the property
3. New air filters in place
4. Lawn, flower beds and all landscaping properly trimmed, weeded and mulched
5. 100% Clean Home as per our cleaning guidelines
6. Smoke alarms/Carbon Monoxide Detectors checked and installed to code
7. All items in good working condition

If our Property Supervisor determines that the property needs cleaning or repairs before the residents move in, our maintenance contractors will complete the cleaning or repairs at your expense.

Do you want us to schedule a vacant clean of the home after you move out? Yes No

Do you want us to schedule carpet cleaning after you move out? Yes No

Are there any work orders or contractor scheduling that you need assistance with before the home is brought into our property management portfolio? Yes No

