

**2008 MANAGEMENT CLIENT INFORMATION / CLIENT UPDATE FORM**

**Owner Name and Permanent Mailing Address**


Tax ID #
Taxpayer name
E-Mail

**Distribution Check Override: If you want checks sent directly to your bank or accountant, provide the name and address below**

Bank name:
Address:
City/State Zip

Acct #
--------

**List any vendors providing services at your property and indicate  if you want us to pay them from your trust funds**

Name		
Address 1		
Address 2		
Type Service		
Pay	Phone	Tax ID

Name		
Address 1		
Address 2		
Type Service		
Pay	Phone	Tax ID

**\* indicates the need for a lead based paint addendum to all rental agreements.**

**Phone numbers**

Contact Name
Day phone
Night phone
Cell
Fax
Other

**Your Rental Property address**

Mail Box#	Parking #

indicates furnished property and unit phone number

--	--

**Homeowners Association Mgt Co Name and Phone**


**If there is a homeowner repair policy, provide the company name, policy number and telephone number**

Company
Policy #
Phone #

Indicate if you have multiple properties we manage

Total number of units including this one =	
--	--

Indicate Any Items which apply

	The property has a <b>private</b> pool and/or spa
	The <b>private</b> pool and/or spa is properly fenced
	The property was constructed prior to 1978*

If the property is within a Homeowners Association

	Does HOA have any type of pet restrictions
	Copies of HOA rules or CCR&Rs are attached