

INTAKE FORM

OWNER/LANDLORD'S NAME:

TENANT(S):

PROPERTY ADDRESS:

BEDROOMS:

CURRENT MONTHLY RENT:

TOTAL RENT OWED:

RENT OWED FROM: (Date)

TO:

ADDRESS FOR PAYMENT TO BE MADE:

PERSON TO PAY (MUST BE AN ACTUAL HUMAN BEING, NOT AN ENTITY):

Next, send a copy of the lease agreement and ledger. If you do not have those documents, let our office know as soon as possible.

Send over any Section 8 documentation, if applicable.

IMMEDIATELY notify our office if any of the tenants/occupants are active duty military servicemembers.