

RENTAL PROPERTY FORM

TO BE COMPLETED AND SUBMITTED BY OWNER FOR EACH RENTAL OF 30 DAYS OR LONGER

Owner and Property Manager Contact Information

Unit Number: _____
Owner's Name: _____
Address (if any other address than Ambassador): _____

What is the best way to contact you with information?
(Circle one) Phone / Fax / E-mail / Mail
Emergency Phone #: _____ Fax: _____ E-mail: _____

Property Manager Contact Information (if applicable)

Management Company _____
Contact Name _____
Phone _____ E-mail _____

Tenant Information (must be completely filled out)

How many tenants are on your lease? (Each adult must be named on the lease) _____

<u>Full name of tenant(s)</u>	<u>Mailing Address</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

<u>Tenant Contact Phone</u>	<u>Emergency Phone</u>
Tenant 1 _____	_____
Tenant 2 _____	_____
Tenant 3 _____	_____
Tenant 4 _____	_____

Required Documentation - please indicate by \checkmark that you completed the following:

- _____ I have a signed lease naming all tenants who are allowed to occupy the unit.
- _____ Does your lease allow smoking in the unit? ___ Yes ___ No
- _____ I have performed/received a background check on all tenants.
- _____ I have submitted a copy of the Essential Rules for Security with acknowledgement of receipt signed and dated by tenant(s).
- _____ I have left a copy of the Ambassador Residents' Handbook in the rental unit.
- _____ I have submitted a separate signed copy of Acknowledgement of Risks and Release and Waiver of Claims (for use of Roof Garden) for each tenant.
- _____ I have submitted a Personal Information Form, completed by tenants.
- _____ I have submitted an Electronic Key Information Form.
- _____ I have submitted/have on file current proof of insurance for the rental unit.