



7150 W. Potomac Dr.  
Boise, ID 83704

Office: 208-321-1900 fax 208-321-1901

## PROPERTY DESCRIPTION FORM

### Management Information - General information

Present Address (street number, direction, name, and type)					Zip	City	Qualification Code (Class A or B)
Rent Amount	Security Deposit	Bedrooms	Baths	Levels	Family room/Great room	Living Room	Basement (finished or unfinished)
Type (home, Duplex, 4-plex, Apt)	Square Footage	Fireplace (Qty, type)	Laundry (Hookups, W/D included, coin, laundry rm)		A/C (central, wall, window)	Heat (Central, gas, electric, baseboard, cadet, ceiling) Year Built	
Parking (garage, carport, street)	Garage Code	No of Gar Remotes	Parking Spot No	Area	Pets (None, cats, dogs, Negotiable)	Pet Rent	Pet Deposit
Sprinkler (front, back, full, irrigation, city)				Location of timer	Location of shut-off valves		
Location of Mail box		Mail Box Number	Key Code No	School District and phone number for schools			
Pool (Private/community)	Pool Access code or key	Fence (full/partial)	Term	Driving Directions			

### Management Information - Billing and Paying

	Owner	Tenant	FRPM on Behalf of		Owner	Tenant	FRPM on Behalf of		Owner	Tenant	FRPM on Behalf of		Owner	Tenant	FRPM on Behalf of
<b>Electric</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Gas</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Cable</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<b>Lawn</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Water</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Company Name _____ phone number _____											
<b>Sewer</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Company Name _____ phone number _____											
<b>Trash</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Company Name _____ Trash Day _____ phone number _____											
<b>HOA</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Company Name _____ Annual/Quarterly/Monthly _____ phone number _____											
<b>Insurance</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Company Name _____ phone number _____											
<b>Mortgage</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Company Name _____ Account Number _____											

### Maintenance Information - Mechanical

Stove Type (free stranding/drop in)	Stove Color	Stove Model No and Make			Stove Hood Color	Microwave
Microwave Color	Microwave Model No and Make		Refrigerator Type		Refrigerator Color	
Refrigerator Model No and Make			Dishwasher Color	Dishwasher Model No and make		
Crawlspace Access Location		Attic Access		Furnace Location	Furnace Filter Size	
Water heater location		Water heater (electric or gas)	Emergency Water shut off Location			
Electrical Panel Location		Electrical Panel (breaker or fuses)	Exterior Body Paint Code		Exterior Trim Paint Code	
Interior Wall Color(s)			List All Warranties (appliance or home)			
Selling Points						

Owner has read and completed the foregoing property description form and agrees to hold First Rate Property Management free and harmless from any liability or damage arising from incorrect or undisclosed information provided by them.

Owner Signature:	Date:
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