

PROPERTY MANAGEMENT CONSULTATION FORM

Let us take the stress out of managing your rental.

Complete this form so our team can learn about your property and your management needs.

1. Your Contact Information

Fields marked * are required

Full Name *

Phone Number *

Email Address *

Best Time to Reach You

Preferred Method of Contact *

☐

Phone call

☐

Text message

☐

Email

2. Property Location

Property Street Address *

City *

State *

ZIP Code *

3. Property Type and Size

Property Type *

☐

Single-family home

☐

Condominium

☐

Townhome

☐

Duplex

☐

Multifamily property

☐

Other

Number of Units *

Bedrooms

Bathrooms

Approx. Sq. Ft.

Tip: Estimate any item you are unsure about. We can confirm the details during your consultation.

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4. Current Property Status

Check the best answer

- | | |
|---|---|
| ☐ Owner-occupied | ☐ Vacant and ready to rent |
| ☐ Vacant and needs repairs | ☐ Tenant-occupied |
| ☐ Managed by another company | ☐ Under construction or renovation |

Approximate Monthly Rent

Is the Property Part of an HOA?

Are Pets Currently Allowed?

- | | | | |
|------------------------------|-----------------------------|---------------------------------------|---------------------------------|
| ☐ Yes | ☐ No | ☐ Case-by-case | ☐ Unsure |
|------------------------------|-----------------------------|---------------------------------------|---------------------------------|

5. Tenant and Lease Information

Are There Currently Tenants in the Property? *

- | | |
|------------------------------|-----------------------------|
| ☐ Yes | ☐ No |
|------------------------------|-----------------------------|

Current Lease End Date

Current Monthly Rent

Are There Any Current Tenant, Maintenance, Payment, or Lease Issues?

6. Property Condition

How Would You Describe the Property Today?

- | | |
|--|--|
| ☐ Move-in ready | ☐ Needs minor repairs |
| ☐ Needs significant repairs | ☐ Currently being renovated |

Known Maintenance Concerns or Planned Improvements

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7. Services You Are Considering

Check all that apply

- | | |
|---|--|
| ☐ Full-service property management | ☐ Tenant placement and leasing |
| ☐ Rent collection and tenant communication | ☐ Property inspections |
| ☐ Maintenance coordination | ☐ Transition from another manager |
| ☐ Lease compliance support | ☐ Not sure - consultation requested |

8. Timing and Priorities

When Would You Like Management Services to Begin? *

- | | | |
|--|--|--|
| ☐ Immediately | ☐ Within 30 days | ☐ Within 60-90 days |
| ☐ More than 90 days | ☐ Gathering information | |

What Is Your Biggest Property Management Concern?

- | | | |
|---|--|---|
| ☐ Finding a qualified tenant | ☐ Collecting rent | ☐ Handling maintenance |
| ☐ Tenant communication | ☐ Lease compliance | ☐ Property inspections |
| ☐ Late payments or eviction | ☐ Out-of-town ownership | ☐ Reducing stress and time |
| ☐ Other | | |

9. Tell Us More

Why Are You Considering Professional Property Management?

How Did You Hear About Us?

Anything Else We Should Know?

- ☐ I agree to be contacted by Thomas Properties Carolina by phone, text, or email regarding property management services. Message and data rates may apply. Consent is not a condition of purchase.

Owner Signature

Date

REQUEST YOUR FREE PROPERTY MANAGEMENT CONSULTATION

Save and email this completed form, or submit the same information through our website.