



Phone 208-283-5663 • Fax 866-404-2381
 3383 N. Five Mile Rd #245, Boise, ID 83713 • www.cpmidaho.com

PROPERTY INTAKE FORM

PROPERTY ADDRESS: _____

Owner (s) _____
 Owner's Address _____
 Cell Phone _____ Alt/Spouse Phone _____
 Email _____ Emergency contact _____

How did you hear about CPM?
 Online Search, please list the website: _____, Referral, please list the client: _____
 Other: _____

PROPERTY DESCRIPTION:

BDRM x BATH _____ Square Footage _____
 Type of Heat (Gas, Electric, Radiant) _____
 Style of Property (condo, ranch, craftsman, cottage, etc) _____
 Year Built _____ Stories _____
 Date of last interior paint job _____
 Knowledge of lead based paint? (pre-1978 homes) _____
 Age of carpet _____

PETS

Under the law, **service/companion animals are not considered pets** and are exempt from increased deposits and restrictions. Service/companion animals are not limited to dogs and cats. They can be rabbits, horses, pot bellied pigs, etc.
 Pets Allowed Y or N _____ Max # Pets Allowed _____ Restrictions _____

MARKETING STRATEGY:

It is in the best interest of both the Management and Owner to rent the Property as soon as possible. Rental Market rates are sensitive and if your property has not been rented in a reasonable amount of time, three to six weeks; it is most likely because the rent is higher than the rental market warrants. Rent reduction is generally done in \$25-\$50 increments. If the property doesn't rent in a reasonable about of time using these guidelines, we will discuss other options with you.

Initial Marketing Price \$ _____ Security Deposit \$ _____
 Desired Lease Terms (one year, 18 months, two year) _____

DESIGNATION OF OWNER OR TENANT RESPONCIBILITY: (Mark O for Owner or T for Tenant)

Electric _____	Gas _____
Water _____	Sewer _____
Trash _____	Irrigation _____
Mow _____	Weeding _____
Trim Bushes/Shrubs _____	Fertilize _____
Hot Tub/ Pool _____	Other _____

HOMEOWNER'S INSURANCE CONTACT INFO - Please don't skip

Company & Agent Name _____ Address _____
 Phone # _____ Policy # _____

SCHOOLS:

Grade School _____ Jr. High _____
 High School _____

HOMEOWNERS ASSOCIATION:

Board Member Contact Information _____

Does your neighborhood have any restrictions your tenants should know about?

Neighborhood Notes (Additional amenities, neighborhood features): _____

INTERIOR	Y	N	ADDITIONAL INFORMATION
Central A/C			<input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Heat Pump
Wall/Window A/C			Number of Units:
Swamp Cooler			Number of Units:
Central Heat			<input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Heat Pump
Other Heat			Number of Units: Describe:
Fireplace & Chimney			<input type="checkbox"/> Wood Burning <input type="checkbox"/> Gas
Ceiling Fans			Number of Units:
Smoke Detectors			Number of Units:
Water Heater			<input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Other
Water Softener			
Washer Dryer			Hookups are: <input type="checkbox"/> Electric <input type="checkbox"/> Gas
Alarm System			
Refrigerator			Number of Units:
Range/ Oven Combo			<input type="checkbox"/> Electric <input type="checkbox"/> Gas
Microwave			
Dishwasher			
Disposal			
Trash Compactor			
Breakfast Bar			
Pantry			
Vaulted Ceilings			
Plant Shelves			
Hardwood Floors			Condition:
Carpet			Condition:
Other Flooring			Condition:
Tile or Granite Counters			
Separate Dining Room			
Separate Family Room			
Double Vanity			
Soaker Tub			
Mud Porch			
Walk In Closet			
Extra Inside Storage			
EXTERIOR	Y	N	ADDITIONAL INFORMATION
Garage			<input type="checkbox"/> Attached <input type="checkbox"/> Not Attached Number of Car Size:
Carport			<input type="checkbox"/> Attached <input type="checkbox"/> Not Attached
Fenced			<input type="checkbox"/> Fully <input type="checkbox"/> Partially <input type="checkbox"/> Wood <input type="checkbox"/> Chain-link <input type="checkbox"/> Other:
Patio/ Decking			

Outdoor Grill			
Storage/ Shed			
Hot Tub/ Spa			
Pool			
Auto Sprinklers			
Irrigation			
View			
RV Parking			
Yard Type			<input type="checkbox"/> Low Maintenance <input type="checkbox"/> Large Lot
Sidewalks			
Cul-de-sac			
Corner Lot			

MAINTENANCE INFORMATION: please don't skip this info

Furnace Location: _____

Furnace Filter Size: _____

Water Heater Location: _____

Emergency Water Shut Off Location: _____

Electrical Panel Location: _____

Crawl Space Access Location: _____

Sprinkler Timer Box: _____

Owner Signature _____ Date _____

Owner Signature _____ Date _____

Owner Signature _____ Date _____

Agent for Owner _____ Date _____