



MONTE DAVIS REALTY
GROUP CORP

OWNER INFORMATION FORM

CLIENT NAME _____

PROPERTY ADDRESS _____

HOME ADDRESS _____

PHONE (Mobile) _____ (Home) _____ (Work) _____

EMAIL _____

EMERGENCY CONTACT

Name: _____

Email: _____

Phone Pref: (Mobile) _____ (Home) _____ (Work) _____

LIABILITY INSURANCE

Type of Policy: Landlord

Minimum Limit of Liability: \$300,000

Addtl Insured: Monte Davis Property Mgmt, 9901 Brodie Ln, Ste 160-288, Austin, TX 78748

Proof of Coverage: **Agent to email proof of coverage to charlie@montedavispm.com**

W-9 (Attached – please complete and return)

BANK ACCT (Send us a photo of a voided check / call us / enter directly in your owner portal)

HOME WARRANTY COMPANY

Name: _____

Phone: _____

Email: _____

Policy Number _____

Did you authorize your HWC to allow us to call/receive calls? **Yes or No**

HOME/PROPERTY OWNERS ASSOCIATION

HOA or POA Name: _____

Contact Name and Number: _____

Email: _____

Did you authorize your HOA/POA to notify us directly of tenant violations? **Yes or No**

Rules and Regulations: **Please send us information specifically pertaining to tenants.**

REFERRED BY _____

CLIENT'S SIGNATURE AND DATE _____