



Tenant Information Sheet

Name: _____

Mailing Address: _____

Contact Phone Numbers: _____

Email Address: _____

Lease date terms (length of lease): _____

When do you need to move: _____

Desired Location: _____

Property Details: single family duplex condo Other: _____

of Bedrooms: # of baths: Sq. ft: Pool: Waterfront:

Rental Rate: _____

Pets: Yes NO Number of pets _____ Type: _____

Smokers: YES NO Number of residents: _____

Other: _____

Would you consider: Lease purchase Buying a home

Ask us about your different management and sales/purchase options!

Please fax this to 239-267-8613 or email to amy@amydrew.com!

Thanks for your inquiry!

