

Address: \_\_\_\_\_

Tenant: \_\_\_\_\_

# Tenant Information Form

TENANT #1

TENANT #2

WORK

Name:	Name:
Employer:	Employer:
Work Address:	Work Address:
Work Phone: (     )	Work Phone:

HOME

Mailing Address (if different from property address):	
City:	State:     ZIP:
Home Phone: (     )	Cell Phone: (     )
Cell Phone: (     )	e-mail:
e-mail:	Bank Name:
Bank Name:	Account #
Account #	

EMERGENCY

Preferred method of contact: <input type="checkbox"/> Home Phone <input type="checkbox"/> Work Phone <input type="checkbox"/> Cell Phone <input type="checkbox"/> email	
In case of emergency notify:	
Name:	Relationship:
Address:	Phone: (     )

TENANTS

<b>Please list all persons living in the home:</b>	
Name:	Name:
Name:	Name:
Name:	Name:

VEHICLES

TYPE	Make	Model	Color	License Number	State
<input type="checkbox"/> Auto <input type="checkbox"/> truck <input type="checkbox"/> other					
<input type="checkbox"/> Auto <input type="checkbox"/> truck <input type="checkbox"/> other					
<input type="checkbox"/> Auto <input type="checkbox"/> truck <input type="checkbox"/> other					
<input type="checkbox"/> Auto <input type="checkbox"/> truck <input type="checkbox"/> other					

BANK

Bank:	Account #	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
Bank:	Account #	<input type="checkbox"/> Checking <input type="checkbox"/> Savings

The above-stated information is accurate to the best of my/our knowledge. I/We acknowledge that this information may be given to the homeowner's association for the area where we live. I/We will inform Coldwell Banker Best Sellers of any changes or updates as they occur.

SIGNED: \_\_\_\_\_ Date \_\_\_\_\_

SIGNED: \_\_\_\_\_ Date \_\_\_\_\_