



# Homeowner Intel Sheet

Address:

Check all of the following items which will remain:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> All Light Fixtures | <input type="checkbox"/> All Trees, Shrubs, Plants | <input type="checkbox"/> Security Cameras        |
| <input type="checkbox"/> Bathroom Mirrors   | <input type="checkbox"/> Window A/C Units          | <input type="checkbox"/> Basketball Hoop         |
| <input type="checkbox"/> Stove              | <input type="checkbox"/> Pool Equipment            | <input type="checkbox"/> Microwave Oven          |
| <input type="checkbox"/> Refrigerator       | <input type="checkbox"/> Electrostatic Filter      | <input type="checkbox"/> Gas Logs                |
| <input type="checkbox"/> Ice Maker          | <input type="checkbox"/> Garden Statues/Fountains  | <input type="checkbox"/> Fireplace Equipment     |
| <input type="checkbox"/> Washer and Dryer   | <input type="checkbox"/> Window Treatments         | <input type="checkbox"/> Sheds/Storage Buildings |
| <input type="checkbox"/> Ceiling Fans       | <input type="checkbox"/> Blinds                    | <input type="checkbox"/> Playground Equipment    |
| <input type="checkbox"/> Satellite Dish     | <input type="checkbox"/> Surround Sound Speakers   | <input type="checkbox"/> TV Mounts               |

Explain any items which do not remain:

Check all of the following which apply:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Electric Dryer Connection | <input type="checkbox"/> Cable Ready     | <input type="checkbox"/> Copper Tubing for Ice Maker                 |
| <input type="checkbox"/> Gas Dryer Connection      | <input type="checkbox"/> Cable Available | <input type="checkbox"/> City Sewage <input type="checkbox"/> Septic |

If you have septic, when was it last serviced?

Please add age info to the following:

Age of Roof:

Age of Dishwasher:

Age of Central A/C:

Age of Cooktop:

Age of Heating System:

- |                              |                                   |
|------------------------------|-----------------------------------|
| <input type="checkbox"/> Gas | <input type="checkbox"/> Electric |
|------------------------------|-----------------------------------|

- |                              |                                   |
|------------------------------|-----------------------------------|
| <input type="checkbox"/> Gas | <input type="checkbox"/> Electric |
|------------------------------|-----------------------------------|

Age of Oven:

Age of Hot Water Heater:

- |                              |                                   |
|------------------------------|-----------------------------------|
| <input type="checkbox"/> Gas | <input type="checkbox"/> Electric |
|------------------------------|-----------------------------------|

# of Gallons:

Age of Windows:

Solar  Yes  No - If yes, is it  owned  leased?

Insurance Company:  Agent:

Annual Insurance Premium: \$

Are you in a high fire zone?  Yes  No

Utilities

	Service Provider	Average Bill Amount \$
Electric		
Gas		
Water		
Garbage		
Sewer		
Alarm		

Alarm:  Owned  Leased - Do you have surveillance?  Audio  Video  None

**Upgrades to your home:**

Smoke alarms?  Yes  No

Are they less than 10 yrs old in & each bedroom?  Yes  No

Carbon Monoxide detectors?  Yes  No

Are they less than 10 yrs & on each level of the home in the hallway?  Yes  No

Mailbox key and # if shared

Amenity Access/keys/fobs

Garage Keypad and Openers - please provide code

If assigned/reserved parking, what is the spot number?

Monthly HOA Dues:

Mello Roos Fees:

If available, please provide copies of the following:

- Information on any HOA assessments
- HOA documents, Covenants, Bylaws, Rules, etc.
- Current termite/pest contract information
- Latest Tax Bill
- Copy of survey, plot plan, and/or appraisal
- Copy of floorplan
- Receipts for major improvements, repairs, or renovations
- 2 extra house keys
- Security instructions/passwords

List personal property you plan to have remain with the home:

List affixed property you are taking with you:

Is there anything special about your home, lot, or neighborhood that you would like to share?