

Owner Information Form

Property Address: _____

*Owner Information

Owner Name(s): _____

Social Security/Tax ID# (for tax reporting and ownership verification purposes): _____

Mailing Address: _____

Phone: _____ Email: _____

How does property owner prefer to receive information from Anwa Property Management?

Email Mail

This Property is:

For Rent One Year Lease period _____ Month to Month Lease

Tenant Information

If rented, provide contact information for the tenant(s):

Name(s): _____

Phone: _____ Email: _____

Note:

Tenants' rules and regulations of this property were approved by property owner and will be provided to the tenants by Anwa Property Management.

Return completed form to:
Anwa Property Management
PO Box 81146
San Marino, CA 91118
Email: anwagroup@gmail.com
Tel: (626) 466-7788