

PROPERTY INFORMATION FORM - DETAILED

PROPERTY ADDRESS: _____

DIMENSIONS / AREA: _____

OWNER: _____

TAX REGISTERED: Yes / No : _____

POSTAL ADDRESS: _____

SUBURB: _____ STATE: _____ P/CODE: _____

PHONE: _____ FAX: _____

EMAIL: _____

MANAGEMENT FEE: _____ AUTHORITY DATE: _____

BUILDER / INSURER: _____

MAINTENANCE: Plumber: _____

Electrician: _____

SOLICITOR: _____ PHONE: _____

EMAIL: _____

LESSEE: _____

TRADING AS: _____

POSTAL ADDRESS: _____

SUBURB: _____ STATE: _____ P/CODE: _____

PHONE NUMBERS: OFFICE: _____ FAX: _____

MOBILE: _____ EMAIL: _____

USE OF PREMISES: _____

COMMENCEMENT DATE: _____

COMMENCING RENTAL: \$ _____ pa payable \$ _____ p.c.m

LEASE TERM: _____ OPTIONS: _____

REVIEW METHOD: _____

OUTGOINGS:	Council Rates	Paid by	Owner / Tenant
	Water Rates	Paid by	Owner / Tenant
	B/Corp Fees	Paid by	Owner / Tenant
	Plate Glass Ins.	Paid by	Owner / Tenant
	Public Liability Ins.	Paid by	Owner / Tenant
	Building Ins.	Paid by	Owner / Tenant