



7120 Pav Way #103  
Prescott Valley, Arizona 86314  
www.ppprescott.com

Telephone: (928) 445-8750  
Fax: (928) 445-5542  
Email: info@ppmprescott.net

Dear New Owner,

Enclosed with your Management Contract is a form for our records. Please complete, sign and return to our office. This form includes information to help us keep our bookkeeping accurate and to help us to serve you in the best way possible.

- Line #1:* This should be the exact way you would like your checks made payable. This information should match information provided on W-9.
- Line #2:* Primary email address. In an effort to “go green”, monthly statements are emailed as well as posted to the Owner Portals. Invoices and other pertinent documents will be available online through the Owner Portal as well.
- Line #3:* Current telephone numbers. Please include home, office, cellular and fax numbers as well as your email address. Please indicate if you prefer to be called and which number is best.
- Line #4:* Provide a mailing address. Year-end statements and 1099's will get mailed out.
- Line #5:* Emergency contact information. In case of an emergency and we are unable to reach you, please provide emergency contact information.

A direct deposit form is also attached. This is the quickest way to receive any monthly disbursements. Please complete and sign this form and return to our office with a voided check.

Thank you for your cooperation in this matter. I am sure this will help our office be better able to service you efficiently. If you have any questions, please do not hesitate to give us a call.

Sincerely,  
*Diane Tenison*  
Diane Tenison



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**PLEASE TYPE OR PRINT**

*Property Address:* \_\_\_\_\_

1. Checks are to be made payable to: \_\_\_\_\_

2. Primary Email address: \_\_\_\_\_

3. Current telephone numbers are:

Home: \_\_\_\_\_ Work: \_\_\_\_\_

Fax: \_\_\_\_\_ Cellular: \_\_\_\_\_

4. Mailing address: \_\_\_\_\_

\_\_\_\_\_

5. Emergency contact information: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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Owner name: \_\_\_\_\_

Address(es) of property managed: \_\_\_\_\_

I (we) hereby authorize **Pierce Property Management** to initiate credit entries and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my (our) ( ) **Checking** ( ) **Savings account (select one)** indicated below: And the depository named below to credit and/or debit the same such account. The amount of the entry may change at any time.

Owner disbursements are made by agreement depending on rent availability. An owner report will be mailed no later than the 15<sup>th</sup> of the month in which said deposit is made.

Depository

Name: \_\_\_\_\_ Branch: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Transit/ABA No.: \_\_\_\_\_ Account No.: \_\_\_\_\_

**Attach a blank check to this authorization form (VOID may be written on the check)**

This authority is to remain in full force and effect until **Pierce Property Management** has received written notification from me (us) of its termination at least 30 days prior to the next transaction date.

Printed names(s): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by: \_\_\_\_\_

Property Manager

Accounting