



STEVENS PROPERTY MANAGEMENT

REAL ESTATE • PROPERTY MANAGEMENT • CONTRACTING

NEW CLIENT APPLICATION

Legal Name:

Client Type: Real Estate Property Management Maintenance & Contracting

Property Address:

Mailing Address:

Cell Phone #:

Work Phone #:

Home Phone #:

Emergency Contact Phone #: (____)

Email Address:

Insurance Agent:

Phone #: (____)

Alarm Keypad Code:

Password:

Miscellaneous Repairs. *Please list any repairs or maintenance that you would like to schedule or receive estimates on:*

Signature:

Date:

PLEASE PROVIDE SIGNED W-9 ALONG WITH THE ACH ELECTRONIC AUTHORIZATION FORM WITH THIS APPLICATION. NO PAYMENTS CAN BE PROCESSED WITHOUT THESE DOCUMENTS COMPLETED.

Please fax all documents to 845.256.8865 or email accounting@stevensrealtygrp.com



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ACH ELECTRONIC AUTHORIZATION FORM

I (we) hereby authorize **Stevens Realty Group DBA Stevens Property Management** (THE COMPANY) to initiate entries to my (our) checking/savings accounts at the financial institution listed below (THE FINANCIAL INSTITUTION). This authority will remain in effect until THE COMPANY is notified by me (us) in writing to cancel it in such time as to afford THE COMPANY and THE FINANCIAL INSTITUTION a reasonable opportunity to act on it.

(Name of Financial Institution)

(Address of Financial Institution - Branch, City, State, & Zip)

Financial Institution Routing Number: _____

Checking/Savings Account Number: _____

These numbers are located on the bottom of your check as follows:

⑆ 123456789 ⑆ 1234567890123 ⑆
Routing Number Account Number

(Signature)

(Date)

(Name - PLEASE PRINT)

(Address - PLEASE PRINT)