



RESIDENTIAL PROPERTY MANAGER INFORMATION / AUTHORIZATION

To best serve you as managing agent for your Homeowners Association, we need to know if you plan to rent or lease your property. Please complete the requested information on this form, then sign and return it to our office utilizing our contact information shown at the bottom of this page.

Property Address: _____

Owner Name: _____

Mailing Address of Record: _____

Contact Number: _____

Email Address: _____

I understand that my Homeowners Association will maintain ONLY one (1) official Mailing Address of Record for my homeowner account, as I have indicated above. I also understand that ALL Assessment and Collection information specifically, will be mailed ONLY to my Mailing Address of Record regardless of my having retained the services of a property manager or property management company. Further, I will ensure that my tenants receive and understand their responsibilities in the Community's Governing Documents. **If I intend for ALL correspondence related to my property to be directed to my property manager (including assessment related information), I understand that I must use my property manager's mailing address as my Mailing Address of Record shown above and have indicated my desire accordingly on the lines above.**

____ **NO, I DO NOT PLAN TO LEASE or RENT THIS PROPERTY.** If I am not already residing in this home, I anticipate moving in to this residence on _____

____ **YES, I PLAN TO LEASE or RENT MY PROPERTY**

____ I will self-manage this property.

OR

____ I have retained the services of the professional property manager indicated below and I understand that no official notifications of any kind will be provided to my manager unless/until I have specified their mailing address as my Mailing Address of Record at the top of this form.

Property Manager Company Name: _____

Manager Name & Phone Number(s): _____

Manager Email Address: _____

Owner Signature: _____ Date: _____

McNeil Management Services, Inc.
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