



Prospective Homeowner,

Thank you for considering **Rays Realty Group** to manage your rental property. We are honored that you've chosen to explore our services, and we look forward to the opportunity to partner with you. At Rays Realty Group, our mission is to provide property owners with the highest level of care, professionalism, and results.

We offer a full range of services designed to make property ownership stress-free and profitable, including but not limited to:

- Property Management
- Professional Property Listings & Showings
- Marketing and Advertising Across Multiple Platforms
- Applicant Screening & Reference Verification
- Lease and Rental Document Preparation
- Rent Billing and Collection
- Detailed Monthly Owner Statements – Owners Portal
- Move-in & Move-out Walkthrough Inspections
- Lease Renewals
- Full-Service Maintenance Coordination

Our team is committed to delivering clear communication, reliable tenant placement, and expert property oversight. We take pride in providing detailed updates so you can feel confident knowing your investment is in good hands.

Please take a moment to review this packet for more information about our services. If you're ready to move forward, you may sign the management agreement at your convenience—or reach out with any questions you may have.

We look forward to serving you and building a successful long-term partnership.

Sincerely,

Koty Ray
Broker | Director of Operation
Rays Realty Group



OWNER/CLIENT INTAKE FORM

Disclaimer: Thank you for your interest in being a client of **Rays Realty Group LLC**. Information collected about new clients is confidential and will be treated accordingly.

OWNER/CLIENT INFORMATION

Owner Name: _____

Owner Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

Owner Social: _____

Owner Company Name (if Applicable): _____

TAX ID/EIN#: _____

Work Phone: _____

Property Address: _____

Property Type: ___ Multifamily ___ Residential ___ Investment ___ Commercial

Property Information: Beds: _____ Bathroom: _____ ½ Bath: _____ SQ Footage: _____

Number of Properties requesting service to manage (doors): _____

****Please attach a copy of your Photo ID and email documents to: Koty@RaysRealtyGroup.net**

SIGNATURE

Owner Signature: _____

Print Name: _____ Date: _____