

# PROPERTY ANALYSIS



Fill out the information below and fax to 888-648-6700 / 719-228-6768  
or mail to PO Box 1298 Colorado Springs, CO 80901-1298.

Name/Property: \_\_\_\_\_

Address: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Please enter square footage for each apartment style and how many units you have of that particular type.

**STUDIO**

*Sq. Footage    # of Units*


**1 BED / 1 BATH**

*Sq. Footage    # of Units*


**2 BED / 1 BATH**

*Sq. Footage    # of Units*


**2 BED / 2 BATH**

*Sq. Footage    # of Units*


**3 BED / 2 BATH**

*Sq. Footage    # of Units*


**OTHER**

*Sq. Footage    # of Units*


Enter the utility numbers for utility charges you intend to bill back. We can do an analysis based on annual and/or monthly utility numbers.

**ANNUAL**

<b>GAS:</b>		
<b>ELEC:</b>		
<b>WATER:</b>		
<b>SEWER:</b>		

**MONTHLY**

<b>GAS:</b>		
<b>ELEC:</b>		
<b>WATER:</b>		
<b>SEWER:</b>		