



Rental Referral

Name: _____

Phone: _____

E-mail: _____

Address: _____

Property Profile

Location: _____

Lease Amount: \$ _____

Pets? Yes No If yes, what type? _____

of occupants: _____

How they heard about us: _____

Date needed: _____

Bedrooms: _____ Bathrooms: _____ Half-baths: _____

Square footage: _____ One-story Two-story

Term of lease: _____

Pool: Yes No

Type of property: Townhome House Condo Apartment

Lawn service: Yes No

Referral Agent: _____ Date: _____

Referral Broker: _____ Date: _____

Referral Broker's Address: _____

Rent Works, LLC Broker: _____ Date: _____

Amount of referral \$ _____ to be paid to referring broker within 30 days of lease start date.