

Packet Sent: _____

Lake Tahoe Accommodations RENTAL APPRAISAL FORM

Date: _____

Unit Address: _____ Area: _____ Unit Phone: (____) _____

Owner Name: _____ Home Phone: (____) _____

Owner Address: _____ Work Phone: (____) _____

FAX Phone: (____) _____

City: _____ State: _____ Zip: _____ E-mail : _____

of Bedrooms: _____ # of Baths: _____ Sleeps: _____ # of Levels: _____ Approx. Sq. Feet: _____

Referred By: _____ Notes: _____

LOCATION: Near Lake Near Golf Near Skiing Near Casinos Near Shuttle

Directions/Mileage: _____

PARKING / EXTERIOR: Garage # of cars _____ Driveway # of cars _____ Car Port # of Cars _____ Common Area # of Cars _____

Exterior finish/color _____ Style of home _____

ENTRY: Level # _____ Notes: _____

LIVING ROOM Level # _____ Decor: _____ View : _____

Stereo CD CTV Size _____ DVD VCR Video Library Cable/Extended Basic Wet/Dry Bar

Sofa bed size: _____ Woodstove Fireplace: _____ Wood burning Gas Burning Only

Deck / Patio: _____ Carpet / Flooring: _____

Notes: _____

KITCHEN/DINING Level # _____ Dining Seats for _____ Bar Seating for _____

Microwave Range: GAS / ELECTRIC Dishwasher Gourmet Tile

Notes: _____

BEDROOMS:	BED SIZE	LVL/LOC	PVT BATH	TV	Comments
Master Bedroom					
2 nd Bedroom					
3 rd Bedroom					
4 th Bedroom					
5 th Bedroom					
6 th Bedroom					
LOFT					

Notes: _____

BATHROOMS	FULL	3/4	1/2	PVT	SHARE	LOCATION	JACZ
Master Bath							
2 nd Bath							
3 rd Bath							
4 th Bath							

Notes: _____

FAMILY ROOM

Level # _____ Decor: _____ View: _____

Stereo CD CTV Size _____ VCR Video Library Sofa bed size: _____

Woodstove Fireplace: _____ Wood burning Gas Burning Only Wet/Dry Bar

Flooring / Carpet: _____ Deck/Patio: _____

Notes: _____

OTHER

No Smoking Sauna Fenced Yard Pets OK Boat Dock / Buoy BBQ Gas or Charcoal

Heater Location: _____ FANG: Propane / Natural Gas Wall Furnace Hot Water Baseboard Elec. Baseboard

Hot Water Heater: Gas / Electric / Propane Location _____

Breaker Box: Location _____

Water Shutoff: Location _____

Hot Tub Size: _____ Location: _____ Washer/Dryer: Conventional / Stacking / Complex

Amenities: Indoor Pool Outdoor Pool Spa Tennis Courts Exercise Facilities _____

HIGH SEASON RATES: Two Days _____ Extra Nt _____ Weekly _____

OFF SEASON RATES: Two Days _____ Extra Nt _____ Weekly _____

Security Deposit _____ LTA Cleaning Fee _____ Quality Grade _____

Recommendations Given:

FOLLOW-UP INFORMATION:

Date **Status**

