



# UTILITY INFORMATION

Average utility bills for the last 12 months (estimated from Sellers' records)

Owner's Name: \_\_\_\_\_

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

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

**ELECTRICITY:** \_\_\_\_\_ **MONTHLY AVERAGE:** \_\_\_\_\_

Provider Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

**GAS:** \_\_\_\_\_ **MONTHLY AVERAGE:** \_\_\_\_\_

Natural Gas  Propane If Propane:  Owned  Leased

Provider Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

**WATER:**  City  Co-Op  MUD  Well **MONTHLY AVERAGE:** \_\_\_\_\_

Provider Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

**SEWER:**  City  Septic **MONTHLY AVERAGE:** \_\_\_\_\_

Provider Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

**TRASH:** \_\_\_\_\_ **MONTHLY AVERAGE:** \_\_\_\_\_

Provider Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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



# EXCLUSIONS, AUDIO/VIDEO SURVEILLANCE & ALARM INFORMATION

**EXCLUSIONS:** i.e. drapes, rods, TV mounts, play set, A/V equipment, attached items, etc

---

---

---

## AUDIO/VIDEO SURVEILLANCE:

Is there Audio/Video surveillance?  Yes  No

Does the surveillance equipment stay with the property?  Yes  No

If yes, describe in detail: \_\_\_\_\_  
\_\_\_\_\_

## ALARM SYSTEM:

Do you have an alarm?  Yes  No

If yes, do you own or lease equipment?  Owned  Leased

Is there a contractual commitment?  Yes  No

Details of contract: \_\_\_\_\_  
\_\_\_\_\_

Leasing Co. Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_