

“INFORMATION INQUIRY”

PLEASE FILL OUT & FORWARD TO DESIRED DEPARTMENT

Date: _____

Owner: _____

Address: _____

Home Phone: _(____)_____

Work Phone: _(____)_____

Cell Phone: _(____)_____

E-Mail Address: _____

I HAVE QUESTIONS ABOUT:

Check all that apply

Bookkeeping

Monthly Statements

Annual Information

General Items

Insurance &/or Renewal

Maintenance Questions

Tenant Relations

Other

Additional Comments:

Please click on the appropriate Contact email to send your request:

Bookkeeping:

Tristin Rennewtiz Tristin@Cyclerealestate.com

Property Manager:

Steve Watts Steve@Cyclerealestate.com

Association Property Manager:

Denise Hughes Denise@Cyclerealestate.com

Association Property Manager / Office Manager / Associate Broker

Karen Pate Karen@Cyclerealestate.com

Broker / Commercial Management & Leasing:

Dan Pate DanPate@Cyclerealestate.com