

Owner(s) Profile

- Name(s)_____
- Social Security Number(s)_____
- Date(s) of Birth_____
- Address_____
- Mailing Address (if different)_____
- Phone Number(s)_____
- Cell Number(s)_____
- Fax Numbers(s)_____
- Email Address(es)_____
- Who Should Your Check be Written To?_____
 - For direct deposit please fill out the direct deposit enrollment form
- Emergency Contact(s)
 - Name_____
 - Phone_____
 - Address_____
 - Relation_____

Are you interested in purchasing more investment properties? Yes No
If yes, please explain what you might be interested in _____

Are you interested in selling your investment properties? Yes No
If yes, please explain what your plans might be _____

Additional notes and comments _____

Signature Authorization

I hereby authorize **Kasteel Property Management** to order a background check. It is understood that a copy of this form will also serve as authorization.

_____ Printed Name	_____ Date of Birth	_____ Printed Name	_____ Date of Birth
_____ Signature	_____ Date	_____ Signature	_____ Date