

Table of Contents for Transition Checklist for Apartments

Transition Checklist I

Property Status II

Item Task List III

Project List VI

Sample Letters V

Employee Evaluation Form VI

Service Brief VII

Capital Projects VIII

Emergency Information IX

Contract Summary X

Inventory XI



PROPERTY MANAGEMENT TRANSITION CHECK LIST

FOR APARTMENT PROPERTIES

**PROPERTY ONE, INC.**

**3500 N. Causeway Blvd.**

**Suite 600**

**Phone (504) 681-3400**

[**www.propertyone.com**](http://www.propertyone.com)

**Sample Letter**

Management

To Vendors Regarding New Property Management Company

Date

Vendor Name

Address

Address

Dear \_\_\_\_\_\_\_\_\_\_\_\_\_\_,

Effective \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Property One, Inc. has been selected to provide property management services for the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_apartment property located at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

All future correspondence, communication, etc. with regard to the property should be directed through our office located at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_and my telephone number is \_\_\_\_\_\_\_\_\_\_\_\_.

All invoices should be in the name of (\_\_\_\_\_\_\_\_\_\_\_\_) c/o Property One, Inc.

If you have any questions, please feel free to contact me. We look forward to working with you in the future.

Yours truly,

Property Manager

**Sample Letter**

Resident Letter

Date

Dear \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

Effective \_\_\_\_\_\_\_\_\_\_\_\_ Property One, Inc., has been selected to provide property management services for the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

We are excited to have been chosen as your management team and look forward to meeting each of you in the near future. If you have any questions, please don't hesitate to stop by the office or call us at \_\_\_\_\_\_\_\_\_\_\_\_\_.

Yours truly,

Property Manager

**Service Brief**

Property:

Date:

Contractor Name:

Address:

Phone Number:

Contact Name:

Address:

(if different from above address)

Phone Number:

(if different from above address)

Contract Type:

Performance Schedule (When and what is done):

Term:

Cancellation policy:

Cost per month:

|  |  |  |  |
| --- | --- | --- | --- |
| Insurance |  |  | Amount of Coverage |
|  | Workmen's Compensation Carried | Yes/No | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Certificate on File | Yes/No |  |
|  |  |  |  |
|  | Employer's Liability | Yes/No | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Certificate on File | Yes/No |  |
|  |  |  |  |
|  | Comprehensive General Liability | Yes/No | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Certificate on File | Yes/No |  |
|  | Contractual Liability | Yes/No | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Certificate on File | Yes/No | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Existing Employee Evaluation Form**

1. Name:

Address:

Phone #:

Birthday:

1. Position:
2. Length of time with existing management company
3. Length of time with project
4. Current Salary $
5. Next review per existing company policy
6. Current vacation eligibility per existing company policy
7. Attitude
8. Appearance

10) Educational Background

1. Job Knowledge
2. Does existing employee wish to remain with property? Yes\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_
3. Property One, Inc. Management recommendations for employee:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. If employee is not appropriate to remain at property, should he/she transfer to another Property One, Inc. property? Yes\_\_\_\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_\_\_\_\_
5. General Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Property Manager conducting interview:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Property Status**

The following is a basic checklist of items indicating the status of the property at the time of the takeover:

Name of property:

Address:

Gross square feet

# of Units \_\_\_\_\_\_\_\_

Occupancy

Monthly Rental

Range $

Past Rent at

Takeover $ / % of total gross

Past Due Invoices $

# of Units in

Market Ready

Condition

General Physical

Condition

Property Keys

Obtained yes/no

Site Plan Obtained yes/no

Maintenance logs

Available yes/no

Survey available yes/no

**Capital Projects Performed**

|  |  |  |
| --- | --- | --- |
| **Year** | **Project** | **Cost** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Preventative maintenance program**

Has one been maintained? Yes/no

Review of current preventative

Maintenance program