



Lease Creation Form

Please Fax To: 866.924.3936

Please complete the form below and fax to the number shown above.

Property Address (Inc. Unit #): _____

LEASE INFORMATION	
Lease Start Date:	
Lease End Date:	
Month To Month?	Yes No
Rent:	
Early Termination Fee:	
Late Fee:	
Initial Deposit:	
Require Credit Card Backup?	Yes No

RESIDENT INFORMATION	
Resident's CollectMyRent.com Username*:	
* If resident does not yet have a CollectMyRent.com, then have the resident complete the Resident Enrollment Form and include it with this document.	

CONTACT INFORMATION	
Your Name:	
Your Phone Number:	
Your Email Address:	
Your Account Username: *	
* Please include your username so we can identify which account you want this lease created under.	

You lease information will be entered into the system within 48 hours of receiving your fax. Thank you for utilizing our system for your business.

Sincerely,
The CollectMyRent.com Staff