RENT ROLL FORM

Manager's Name:	DATE:
Phone(s):	

Type of Space [OFFICE] [RETAIL] [INDUSTRIAL]	Tenant Name [IF VACANT WRITE "VACANT"	Total Area [SQUARE]	Rental Period Begins [DATE]	Monthly Rents	Lease Start & End Date	Accommodation Detail [Bedrooms, Bathrooms, Other]	Repair & Maintenance [Electricity, Gas, Other]

Rent Roll Certification
I/We certify that the rent roll(s) dated DD/MM/YYYY for the property above is/are true and correct.
[Name]: Date: