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Rent Rite Directory Property Registration

I am interested in: Incident Reporting Tenant Screening Both

1.) First Name: _____ Last Name: _____

Job Title: _____ Email Address: _____

Phone Number: Mobile _____ or Work _____

2.) Property Type (Check One): Residential Commercial

Property Name: _____ # of Units: _____

Property Address: _____

City: _____ County: _____ State: _____ Zip: _____

Property Phone: _____ Property Email: _____

3.) Are you registering a Property Management Company (PMC): Yes No

If yes, PMC Name: _____ PMC Address: _____

City: _____ County: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Preferred Login ID: _____

Signature: _____ Date: _____

By Signing above you are giving us permission to enter the above information into The RRD database as an authorized user.

Please contact Elizabeth Whited at 214.520.7577 if you have any questions, and fax or email the completed form to 214.594.2804 ewhited@therrd.com.