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## CLIENT INTAKE

FAX completed form to 303-969-0501 or Email to Tim@KlassLawGroup.com

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

\_\_\_\_\_  
Owner Name or other name for Pleadings

\_\_\_\_\_  
Property Management Company

\_\_\_\_\_  
Primary Contact (First & Last Name)      Email      Phone      Fax

\_\_\_\_\_  
Billing Contact      Email      Phone      Fax

\_\_\_\_\_  
Billing Address      City      State      Zip Code

\_\_\_\_\_  
Apartment/Property Address      City      State      Zip Code

Is your property secure or locked? Yes or No  
How will process server gain access? \_\_\_\_\_

Are there issues such as subsidized housing, lease purchase options, land contracts? Yes or No  
If yes, please describe: \_\_\_\_\_

Please provide details of any other concerns about your property: \_\_\_\_\_

Are you a member of any industry associations or trade organizations? Yes or No  
If yes, which organizations? \_\_\_\_\_

Whom may we thank for your business? \_\_\_\_\_

\_\_\_\_\_  
Signature of Owner/Authorized Agent\*

\* By signing and submitting this Client Intake Form you acknowledge that you have reviewed and agree with the terms and conditions as set forth in the Terms of Engagement located on our website at [www.KlassLawGroup.com](http://www.KlassLawGroup.com).

For use by KLG: Client ID: \_\_\_\_\_ Entered in Database on: \_\_\_\_\_