



Required fields are in BLUE marked with an (*). Please complete all 4 pages.

*Visibility Type: _____ (Lookup)
*For Sale? Y N *For Lease? Y N *Lease Purchase? Y N
*Listing Date: ____/____/____ *Expiration Date: ____/____/____ *List Price: _____

Property Type: *Business Opportunity Y N *Hospitality Y N *Industrial Y N *Office Y N
*Retail Y N *Shopping Center Y N *Special Purpose Y N

*Parish: _____ (Lookup) *Area: _____ (Lookup)

*No: _____ Dir: _____ *Street Name: _____ Unit#: _____

*City: _____ InCityLimits: Y N *State: _____ *Zip: _____ (Lookup)

*TaxID: _____ (30) *Lot#: _____ (16) Zoning: _____ (16) *Subdivision: _____ (Lookup)

Lot Dimensions: _____ (50)

Legal Description: _____ (240)

Directions: _____ (240)

*Business Opportunity? Y N *Hospitality? Y N *Industrial? Y N *Office? Y N *Retail? Y N
*Shopping Center? Y N *Special Purpose? Y N

LeasePrice: _____ (#6) PER: <input type="checkbox"/> MONTH <input type="checkbox"/> YEAR <input type="checkbox"/> SQFT Lease Term (yrs) _____ *Est Bldg Insurance: _____ (#6) SubleaseThru: ____/____/____ Tenant Deduct: _____ (#5) Gross Annual Inc.: _____ (7)	*CAMFee/SF/Yr: _____ (#5) Date Avail: ____/____/____ *Deposit: _____ (#5) AnnualOpExpense: _____ (7) NetAnnualInc: _____ (7)	*Property Tax: _____ (#5) Sublease: <input type="checkbox"/> Y <input type="checkbox"/> N MinTerms(Yrs): _____ (#2) Occupancy %: _____ (3)
---	--	---

*Acres: _____ (#6) *Retail SqFt: _____ (#6) #Stories: _____ (#3) *Warehouse SqFt: _____ (#6) #Restrooms: _____ (#3) Current Use: _____ (32) Elevator?: <input type="checkbox"/> Y <input type="checkbox"/> N #Cranes: _____ (#2) Span Dist(ft): _____ (#3)	*Office SqFt: _____ (#6) *Total SqFt: _____ (#6) #Offices: _____ (#3) NetRentable SqFt: _____ (#6) #OverheadDrs: _____ (#2) CeilingHght(ft): _____ (#2) 3 rd Party Management: <input type="checkbox"/> Y <input type="checkbox"/> N Load Dock?: <input type="checkbox"/> Y <input type="checkbox"/> N Eave Height(ft): _____ (#2) #Parking Spaces: _____ (#3)	*Source SqFt: <input type="checkbox"/> APPRAISAL <input type="checkbox"/> BLUEPRINT <input type="checkbox"/> PUBLIC RECORD <input type="checkbox"/> OWNER <input type="checkbox"/> APPROXIMATE <input type="checkbox"/> MEASURED *Mineral Rights: <input type="checkbox"/> RESERVED <input type="checkbox"/> CONVEYED <input type="checkbox"/> NEGOTIABLE	*Apprx. Age: <input type="checkbox"/> New: Proposed Construction <input type="checkbox"/> New: Under Construction <input type="checkbox"/> New Complete <input type="checkbox"/> <1 Year <input type="checkbox"/> 1-5 Years <input type="checkbox"/> 6-10 Years <input type="checkbox"/> 11-20 Years <input type="checkbox"/> 21+ Years <input type="checkbox"/> Unknown Estimated Date of Completion: ____/____/____
--	--	---	---

*Year Built: _____ (#4) Year Built Effective: _____ (#4)

Year Built Source:

APPRAISER ASSESSOR BUILDER ESTIMATED OTHER OWNER PUBLIC RECORDS SEE REMARKS

We/All of the undersigned state that to the best of our knowledge and belief, the information herein is true and accurate at the time of signature:

*Owner Signature: _____ Phone: _____

*Owner Signature: _____ Phone: _____

*Broker Signature: _____ Phone: _____

*Broker Signature: _____ Phone: _____

*All information herein has not been verified and is not guaranteed.



Required fields are in **BLUE** marked with an (*). Please complete all 4 pages.

Year Built Details _____

_____ (1024)

Remarks: _____

_____ (2000)

REALTOR Remarks: _____

_____ (2000)

*Display on Internet? Y N Display Address? Y N VOW: Allow AVM? Y N VOW: Allow Comments? Y N

Sellers: (Last, First) _____ Seller Phone: (____) _____

Seller e-mail: _____

*List Office: _____ *List Office ID: _____

*List Agent: _____ *List Agent ID: _____

List Team: _____

Co-List Agent: _____ Co-List ID: _____

*Occupied By: OWNER TENANT VACANT (Prev. Occupied) NEW (Never Occupied)

*Limited Service: Y N (IF you answer this 'Y' then you must disclose the services you will not provide under the feature code below called List Agent/Office will NOT.)

*List Type: EXCLUSIVE AGENCY EXCLUSIVE RIGHT EXCLUSIVE RIGHT W/PROSPECT OTHER

Features – Select all that apply. The * and (R) denote required features.

B - LIST AGT/OFC WILL NOT	D - HOSPITALITY TYPE	
<input type="checkbox"/> B2 - NOT Advise Seller on PAs	<input type="checkbox"/> D1 - Bed & Breakfast	<input type="checkbox"/> D12 - Resort
<input type="checkbox"/> B3 - NOT Arrange Appts	<input type="checkbox"/> D2 - Casino	<input type="checkbox"/> D13 - Ski & Sun
<input type="checkbox"/> B5 - NOT Negotiate for Seller	<input type="checkbox"/> D3 - Chalet	<input type="checkbox"/> D14 - Spa
*C - COMMERCIAL TYPE	<input type="checkbox"/> D4 - Convention Center	<input type="checkbox"/> D15 - Vacation Rental(s)
<input type="checkbox"/> C1 - Special Purpose	<input type="checkbox"/> D5 - Extended Stay	<input type="checkbox"/> D16 - Other
<input type="checkbox"/> C2 - Business Opportunity	<input type="checkbox"/> D6 - Golf Course	
<input type="checkbox"/> C3 - Hospitality	<input type="checkbox"/> D7 - Hostel	
<input type="checkbox"/> C4 - Industrial	<input type="checkbox"/> D8 - Hotel	
<input type="checkbox"/> C5 - Office	<input type="checkbox"/> D9 - Inn	
<input type="checkbox"/> C6 - Retail	<input type="checkbox"/> D10 - Motel	
<input type="checkbox"/> C7 - Shopping Center	<input type="checkbox"/> D11 - Recreation Cabins	

We/All of the undersigned state that to the best of our knowledge and belief, the information herein is true and accurate at the time of signature:

*Owner Signature: _____ Phone: _____

*Owner Signature: _____ Phone: _____

*Broker Signature: _____ Phone: _____

*Broker Signature: _____ Phone: _____

*All information herein has not been verified and is not guaranteed.



COMMERCIAL Data Form

Required fields are in **BLUE** marked with an (*). Please complete all 4 pages.

<p>E - OFFICE TYPE</p> <p><input type="checkbox"/> E1 - Business Park</p> <p><input type="checkbox"/> E2 - Executive Suites</p> <p><input type="checkbox"/> E3 - Governmental</p> <p><input type="checkbox"/> E4 - High-Tech</p> <p><input type="checkbox"/> E5 - Institutional</p> <p><input type="checkbox"/> E6 - Medical</p> <p><input type="checkbox"/> E7 - Mixed Use</p> <p><input type="checkbox"/> E8 - Flex Space</p> <p><input type="checkbox"/> E9 - Net Leased</p> <p><input type="checkbox"/> E10 - Office Building</p> <p><input type="checkbox"/> E11 - Research & Development</p> <p><input type="checkbox"/> E12 - Other</p> <p>F - SHOPPING CENTER TYPE</p> <p><input type="checkbox"/> F1 - Community Center</p> <p><input type="checkbox"/> F2 - Fashion/Specialty</p> <p><input type="checkbox"/> F3 - Free-Standing Store</p> <p><input type="checkbox"/> F4 - Grocery-Anchored</p> <p><input type="checkbox"/> F5 - Mixed Use Shop Center</p> <p><input type="checkbox"/> F6 - Neighborhood Center</p> <p><input type="checkbox"/> F7 - Net Leased Shop Cent</p> <p><input type="checkbox"/> F8 - Outlet Shop Center</p> <p><input type="checkbox"/> F9 - Power Center</p> <p><input type="checkbox"/> F10 - Regional Mall</p> <p><input type="checkbox"/> F11 - Strip Center</p> <p><input type="checkbox"/> F12 - Theme/Festival</p> <p><input type="checkbox"/> F13 - Other</p> <p>G - RETAIL TYPE</p> <p><input type="checkbox"/> G1 - Carwash</p> <p><input type="checkbox"/> G2 - Convenience Store</p> <p><input type="checkbox"/> G3 - Day Care Facility</p> <p><input type="checkbox"/> G4 - Free-Standing Building</p> <p><input type="checkbox"/> G5 - Garden Center</p> <p><input type="checkbox"/> G6 - Mixed Use</p> <p><input type="checkbox"/> G7 - Movie Theatre</p> <p><input type="checkbox"/> G8 - Parking Facility</p> <p><input type="checkbox"/> G9 - Post Office</p> <p><input type="checkbox"/> G10 - Restaurant</p> <p><input type="checkbox"/> G11 - Retail-Pad</p> <p><input type="checkbox"/> G12 - Serv. Station/Gas Station</p> <p><input type="checkbox"/> G13 - Street Retail</p> <p><input type="checkbox"/> G14 - Tavern/Bar/Nightclub</p> <p><input type="checkbox"/> G15 - Vehicle Related</p> <p><input type="checkbox"/> G16 - Other</p> <p>H - INDUSTRIAL TYPE</p> <p><input type="checkbox"/> H1 - Cold Storage</p> <p><input type="checkbox"/> H2 - Flex Space</p> <p><input type="checkbox"/> H3 - Food Processing</p> <p><input type="checkbox"/> H4 - Free-Standing</p> <p><input type="checkbox"/> H5 - Industrial-Business Park</p> <p><input type="checkbox"/> H6 - Manufacturing</p> <p><input type="checkbox"/> H7 - Mixed Use</p> <p><input type="checkbox"/> H8 - Light Industrial</p> <p><input type="checkbox"/> H9 - Net Leased</p> <p><input type="checkbox"/> H10 - Office Showroom</p>	<p><input type="checkbox"/> H11 - Research & Development</p> <p><input type="checkbox"/> H12 - Self Storage</p> <p><input type="checkbox"/> H13 - Truck Terminal</p> <p><input type="checkbox"/> H14 - Warehouse/Distribution</p> <p><input type="checkbox"/> H15 - Other</p> <p>I - SPECIAL PURPOSE TYPE</p> <p><input type="checkbox"/> I1 - Agricultural</p> <p><input type="checkbox"/> I2 - Airport/Airplane Hangar</p> <p><input type="checkbox"/> I3 - Assembly/Meeting Place</p> <p><input type="checkbox"/> I4 - Cemetary/Mausoleum</p> <p><input type="checkbox"/> I5 - Courthouse</p> <p><input type="checkbox"/> I6 - Funeral Home/Mortuary</p> <p><input type="checkbox"/> I7 - Heath Care/Medical</p> <p><input type="checkbox"/> I8 - Jail/Correctnl Facility</p> <p><input type="checkbox"/> I9 - Landfill</p> <p><input type="checkbox"/> I10 - Library</p> <p><input type="checkbox"/> I11 - Marina</p> <p><input type="checkbox"/> I12 - Military Facility</p> <p><input type="checkbox"/> I13 - Mine/Quarry</p> <p><input type="checkbox"/> I14 - Museum/Gallery</p> <p><input type="checkbox"/> I15 - Outdoor Sign</p> <p><input type="checkbox"/> I16 - Salvage Yard</p> <p><input type="checkbox"/> I17 - Saw Mill/Lumberyard</p> <p><input type="checkbox"/> I18 - School/University</p> <p><input type="checkbox"/> I19 - Senior Housing</p> <p><input type="checkbox"/> I20 - Sports/Entertainment</p> <p><input type="checkbox"/> I21 - Tank Farm/Petroleum Strg</p> <p><input type="checkbox"/> I22 - Train Station/Bus Term.</p> <p><input type="checkbox"/> I23 - Truck Term/Transit Fac.</p> <p><input type="checkbox"/> I24 - Zoo</p> <p><input type="checkbox"/> I25 - Other</p> <p>J - BIZ OPPTY TYPE</p> <p><input type="checkbox"/> J1 - Auto Related</p> <p><input type="checkbox"/> J2 - Building and Construction</p> <p><input type="checkbox"/> J3 - Business Services</p> <p><input type="checkbox"/> J4 - Chemicals</p> <p><input type="checkbox"/> J5 - Clothing and Fashion</p> <p><input type="checkbox"/> J6 - Communications and Media</p> <p><input type="checkbox"/> J7 - Educational</p> <p><input type="checkbox"/> J8 - Entertainment and Leisure</p> <p><input type="checkbox"/> J9 - Financial</p> <p><input type="checkbox"/> J10 - Food and Beverage</p> <p><input type="checkbox"/> J11 - General Merchandise</p> <p><input type="checkbox"/> J12 - Hair and Beauty</p> <p><input type="checkbox"/> J13 - Health and Medical</p> <p><input type="checkbox"/> J14 - Home and Garden</p> <p><input type="checkbox"/> J15 - Home and Office Furniture</p> <p><input type="checkbox"/> J16 - Internet Related</p> <p><input type="checkbox"/> J17 - Machinery</p> <p><input type="checkbox"/> J18 - Manufacturing</p> <p><input type="checkbox"/> J19 - Moving/Storage/Delivery</p> <p><input type="checkbox"/> J20 - Office</p> <p><input type="checkbox"/> J21 - Personal</p> <p><input type="checkbox"/> J22 - Professional Services</p> <p><input type="checkbox"/> J23 - Real Estate</p>	<p><input type="checkbox"/> J24 - Retail Stores</p> <p><input type="checkbox"/> J25 - Technology</p> <p><input type="checkbox"/> J26 - Transportation</p> <p><input type="checkbox"/> J27 - Wholesale and Distn</p> <p>*K - COOLING</p> <p><input type="checkbox"/> K1 - Attic Fan Cool</p> <p><input type="checkbox"/> K2 - Ceiling Fan Cool</p> <p><input type="checkbox"/> K3 - Central Air Cool</p> <p><input type="checkbox"/> K4 - Heat Pump Cool</p> <p><input type="checkbox"/> K5 - No Cool</p> <p><input type="checkbox"/> K6 - Wall Units Cool</p> <p><input type="checkbox"/> K7 - Window Units Cool</p> <p><input type="checkbox"/> K8 - Zoned Cooling</p> <p><input type="checkbox"/> K9 - Other Cooling</p> <p>*L - CONSTRUCT</p> <p><input type="checkbox"/> L1 - Block Const</p> <p><input type="checkbox"/> L2 - Brick Const</p> <p><input type="checkbox"/> L3 - Concrete Const</p> <p><input type="checkbox"/> L4 - Frame Const</p> <p><input type="checkbox"/> L5 - Log Const</p> <p><input type="checkbox"/> L6 - Metal Const</p> <p><input type="checkbox"/> L7 - Other Const</p> <p>*N - ELECTRICITY</p> <p><input type="checkbox"/> N1 - 100+ Amps Elec</p> <p><input type="checkbox"/> N2 - 110 Volts Elec</p> <p><input type="checkbox"/> N3 - 150+ Amps Elec</p> <p><input type="checkbox"/> N4 - 200+ Amps Elec</p> <p><input type="checkbox"/> N5 - 220 Volts Elec</p> <p><input type="checkbox"/> N6 - 3Phase Elec</p> <p><input type="checkbox"/> N7 - 440 Volts Elec</p> <p><input type="checkbox"/> N8 - >100 Amps Elec</p> <p><input type="checkbox"/> N9 - Circuit Breaker Elec</p> <p><input type="checkbox"/> N10 - Fuses Elec</p> <p><input type="checkbox"/> N11 - Individ Meter Elec</p> <p><input type="checkbox"/> N12 - Other Electricity</p> <p>*O - EXTERIOR</p> <p><input type="checkbox"/> O1 - Door Sign</p> <p><input type="checkbox"/> O2 - Fully Fenced</p> <p><input type="checkbox"/> O3 - Incinerator</p> <p><input type="checkbox"/> O4 - Lawn Sprinkler</p> <p><input type="checkbox"/> O5 - Loading Dock/Grade</p> <p><input type="checkbox"/> O6 - Loading Dock/Well</p> <p><input type="checkbox"/> O7 - OH Door 10-15 Ft</p> <p><input type="checkbox"/> O8 - OH Door 16-20 Ft</p> <p><input type="checkbox"/> O9 - OH Door <10 Ft</p> <p><input type="checkbox"/> O10 - OH Door >20 Ft</p> <p><input type="checkbox"/> O11 - Outside Storage</p> <p><input type="checkbox"/> O12 - Partially Fenced</p> <p><input type="checkbox"/> O13 - Pole Sign</p> <p><input type="checkbox"/> O14 - Rail Spur</p> <p><input type="checkbox"/> O15 - Roof Sign</p> <p><input type="checkbox"/> O16 - Stabilized Yard Base</p> <p><input type="checkbox"/> O17 - Storage Building</p> <p><input type="checkbox"/> O18 - None</p>
--	---	---

We/All of the undersigned state that to the best of our knowledge and belief, the information herein is true and accurate at the time of signature:

*Owner Signature: _____ Phone: _____

*Owner Signature: _____ Phone: _____

*Broker Signature: _____ Phone: _____

*Broker Signature: _____ Phone: _____

*All information herein has not been verified and is not guaranteed.



Required fields are in **BLUE** marked with an (*). Please complete all 4 pages.

<p>P - FEATURES</p> <ul style="list-style-type: none"> <input type="checkbox"/> P1 - Employee Lounge <input type="checkbox"/> P2 - Fire Sprinklers <input type="checkbox"/> P3 - Freight Elevator <input type="checkbox"/> P4 - Handicap Designed <input type="checkbox"/> P5 - Intercom <input type="checkbox"/> P6 - Living Space Available <input type="checkbox"/> P7 - Security System <input type="checkbox"/> P8 - Smoke Alarms <input type="checkbox"/> P9 - Storage Above Office <input type="checkbox"/> P10 - Walk-In Freezer <input type="checkbox"/> P11 - Waterfront Loading <input type="checkbox"/> P12 - Window Display <p>*Q - FINANCING</p> <ul style="list-style-type: none"> <input type="checkbox"/> Q1 - Assumable Fin <input type="checkbox"/> Q2 - Cash Fin <input type="checkbox"/> Q3 - Conventional Fin <input type="checkbox"/> Q4 - Lease Fin <input type="checkbox"/> Q5 - Lease Purchase Fin <input type="checkbox"/> Q6 - Owner Financed <input type="checkbox"/> Q7 - Private Fin <input type="checkbox"/> Q8 - Trade/Exchange Fin <input type="checkbox"/> Q9 - Other Financing <p>R - FLOORING</p> <ul style="list-style-type: none"> <input type="checkbox"/> R1 - Ceramic Tile Floor <input type="checkbox"/> R2 - Concrete Floor <input type="checkbox"/> R3 - Marble Floor <input type="checkbox"/> R4 - Plywood Floor <input type="checkbox"/> R5 - Slate Floor <input type="checkbox"/> R6 - Tile Floor <input type="checkbox"/> R7 - Vinyl:Sheet Floor <input type="checkbox"/> R8 - Vinyl:Tile Floor <input type="checkbox"/> R9 - Wall to Wall Carpet Floor <input type="checkbox"/> R10 - Wood Floor <input type="checkbox"/> R11 - Other Flooring <p>*S - FOUNDATION</p> <ul style="list-style-type: none"> <input type="checkbox"/> S1 - Basement Found <input type="checkbox"/> S2 - Block Found <input type="checkbox"/> S3 - Brick Piers Found <input type="checkbox"/> S4 - Chain Wall Found <input type="checkbox"/> S5 - Concrete Piers Found <input type="checkbox"/> S6 - Footing Found <input type="checkbox"/> S7 - Piling Found <input type="checkbox"/> S8 - Slab Found <input type="checkbox"/> S9 - Other Foundation <p>*T - GAS</p> <ul style="list-style-type: none"> <input type="checkbox"/> T1 - Gas: Available <input type="checkbox"/> T2 - Gas: Individual Meter <input type="checkbox"/> T3 - Gas: None <input type="checkbox"/> T4 - Gas: On Property 	<p>*U - HEATING</p> <ul style="list-style-type: none"> <input type="checkbox"/> U1 - Central Heat <input type="checkbox"/> U2 - Electric Heat <input type="checkbox"/> U3 - Floor Heaters <input type="checkbox"/> U4 - Gas Heat <input type="checkbox"/> U5 - Heat Pump <input type="checkbox"/> U6 - No Heating <input type="checkbox"/> U7 - Space Heater(s) <input type="checkbox"/> U8 - Wall Unit(s) Heat <input type="checkbox"/> U9 - Zoned Heating <input type="checkbox"/> U10 - Other Heating <p>V - LANDLORD PAYS</p> <ul style="list-style-type: none"> <input type="checkbox"/> V1 - Building Insurance Paid <input type="checkbox"/> V2 - Electricity Paid <input type="checkbox"/> V3 - Full Services Paid <input type="checkbox"/> V4 - Gas Paid <input type="checkbox"/> V5 - Glass Repairs Paid <input type="checkbox"/> V6 - Janitorial Paid <input type="checkbox"/> V7 - LawnCare Paid <input type="checkbox"/> V8 - Maintenance/Repairs Paid <input type="checkbox"/> V9 - None <input type="checkbox"/> V10 - Over Tenant Deduct. Paid <input type="checkbox"/> V11 - Property Taxes Paid <input type="checkbox"/> V12 - Roof Repairs Paid <input type="checkbox"/> V13 - Sewer Paid <input type="checkbox"/> V14 - Structural Repairs Paid <input type="checkbox"/> V15 - Trash Removal Paid <input type="checkbox"/> V16 - Water Paid <p>W - LOCATION</p> <ul style="list-style-type: none"> <input type="checkbox"/> W1 - Downtown <input type="checkbox"/> W2 - Freestanding <input type="checkbox"/> W3 - Historic Area <input type="checkbox"/> W4 - Industrial Park <input type="checkbox"/> W5 - Office Park <input type="checkbox"/> W6 - Rural <input type="checkbox"/> W7 - Shopping Mall <input type="checkbox"/> W8 - Strip Mall <input type="checkbox"/> W9 - Suburban <input type="checkbox"/> W10 - Urban <p>X - LOT DESCRIPTION</p> <ul style="list-style-type: none"> <input type="checkbox"/> X1 - Additional Land Lot <input type="checkbox"/> X2 - Commons Lot <input type="checkbox"/> X3 - Corner Lot <input type="checkbox"/> X4 - Cul-de-sac <input type="checkbox"/> X5 - Dead-End Lot <input type="checkbox"/> X6 - Easement Lot <input type="checkbox"/> X7 - Flood Lot <input type="checkbox"/> X8 - Golf Community Lot <input type="checkbox"/> X9 - Golf Course Front Lot <input type="checkbox"/> X10 - Horse Property Lot <input type="checkbox"/> X11 - Level Lot 	<ul style="list-style-type: none"> <input type="checkbox"/> X12 - No Outlet Lot <input type="checkbox"/> X13 - Sloping Lot <input type="checkbox"/> X14 - Waterfront Lot <input type="checkbox"/> X15 - Wooded Lot <input type="checkbox"/> X16 - Zero Lot Line <input type="checkbox"/> X17 - Subject to Land Lease <p>*Y - PARKING</p> <ul style="list-style-type: none"> <input type="checkbox"/> Y1 - Asphalt Park <input type="checkbox"/> Y2 - Assigned Park <input type="checkbox"/> Y3 - Concrete Park <input type="checkbox"/> Y4 - Covered Park <input type="checkbox"/> Y5 - Limestone/Shell Park <input type="checkbox"/> Y6 - Parking Lot <input type="checkbox"/> Y7 - No Parking <input type="checkbox"/> Y8 - On Site Parking <input type="checkbox"/> Y9 - Parking Garage <input type="checkbox"/> Y10 - Rear Parking <input type="checkbox"/> Y11 - Secured Parking <input type="checkbox"/> Y12 - Street Parking <input type="checkbox"/> Y13 - Under Parking <input type="checkbox"/> Y14 - Unit Garage Parking <p>*Z - PRICE INCLUDES</p> <ul style="list-style-type: none"> <input type="checkbox"/> Z1 - Furn/Fixtures/Equip <input type="checkbox"/> Z2 - Inventory <input type="checkbox"/> Z3 - Real Estate <p>*AA - ROAD FRONTAGE</p> <ul style="list-style-type: none"> <input type="checkbox"/> AA1 - Cul de Sac Front <input type="checkbox"/> AA2 - Curb & Gutter Front <input type="checkbox"/> AA3 - Open Ditch Front <input type="checkbox"/> AA4 - Paved Front <input type="checkbox"/> AA5 - Private Street Front <input type="checkbox"/> AA6 - Public Street Front <input type="checkbox"/> AA7 - Unpaved Front <input type="checkbox"/> AA8 - Other Road Front. <input type="checkbox"/> AA9 - Asphalt RFront <input type="checkbox"/> AA10 - Concrete RFront <input type="checkbox"/> AA11 - Dirt RFront <input type="checkbox"/> AA12 - Gravel RFront <input type="checkbox"/> AA13 - Shell RFront <p>*AB - ROOF</p> <ul style="list-style-type: none"> <input type="checkbox"/> AB1 - Built Up Roof <input type="checkbox"/> AB2 - Composition Shingle Roof <input type="checkbox"/> AB3 - Concrete Roof <input type="checkbox"/> AB4 - Metal Roof <input type="checkbox"/> AB5 - Rubber Roof <input type="checkbox"/> AB6 - Slate Roof <input type="checkbox"/> AB7 - Tar/Gravel Roof <input type="checkbox"/> AB8 - Tile Roof <input type="checkbox"/> AB9 - Other Roof
---	--	--

We/All of the undersigned state that to the best of our knowledge and belief, the information herein is true and accurate at the time of signature:

*Owner Signature: _____ Phone: _____

*Owner Signature: _____ Phone: _____

*Broker Signature: _____ Phone: _____

*Broker Signature: _____ Phone: _____

*All information herein has not been verified and is not guaranteed.



COMMERCIAL Data Form

Required fields are in **BLUE** marked with an (*). Please complete all 4 pages.

<p>*AC - SHOWING</p> <p><input type="checkbox"/> AC1 - Accompany</p> <p><input type="checkbox"/> AC2 - Agency Lockbox</p> <p><input type="checkbox"/> AC3 - Appointment Required</p> <p><input type="checkbox"/> AC4 - Call List Agent</p> <p><input type="checkbox"/> AC5 - Key in Office</p> <p><input type="checkbox"/> AC6 - MLS Lockbox</p> <p><input type="checkbox"/> AC7 - No Lockbox</p> <p><input type="checkbox"/> AC8 - Notice Necessary</p> <p><input type="checkbox"/> AC9 - Security System</p> <p><input type="checkbox"/> AC10 - See Remarks</p> <p><input type="checkbox"/> AC11 - Show Anytime</p> <p><input type="checkbox"/> AC12 - Sign in Required</p> <p><input type="checkbox"/> AC13 - Surveillance in Use</p> <p>*AD - WATER/SEWER</p> <p><input type="checkbox"/> AD1 - Individual Meter Water</p> <p><input type="checkbox"/> AD2 - Other Water/Sewer</p> <p><input type="checkbox"/> AD3 - Private Sewer</p> <p><input type="checkbox"/> AD4 - Private Water</p> <p><input type="checkbox"/> AD5 - Public Sewer</p> <p><input type="checkbox"/> AD6 - Public Water</p>	<p><input type="checkbox"/> AD7 - Retaining Pond</p> <p><input type="checkbox"/> AD8 - Septic Tank</p> <p><input type="checkbox"/> AD9 - Water Well</p> <p>*AE - SPECIAL SALES TYPE</p> <p><input type="checkbox"/> AE1 - 3rd Party/Corp/Relo</p> <p><input type="checkbox"/> AE2 - As Is</p> <p><input type="checkbox"/> AE3 - Auction</p> <p><input type="checkbox"/> AE4 - Court Approval Rqd</p> <p><input type="checkbox"/> AE5 - Dual/Var Comm</p> <p><input type="checkbox"/> AE6 - Foreclosed</p> <p><input type="checkbox"/> AE7 - Lis Pendens</p> <p><input type="checkbox"/> AE8 - N/A</p> <p><input type="checkbox"/> AE9 - Owner/Agent</p> <p><input type="checkbox"/> AE10 - Short Sale</p> <p><input type="checkbox"/> AE11 - HUD</p> <p><input type="checkbox"/> AE12 - Currently Damaged</p> <p>TP - TENANT PAYS</p> <p><input type="checkbox"/> TP1 - Building Insurance Paid</p> <p><input type="checkbox"/> TP2 - Electricity Paid</p> <p><input type="checkbox"/> TP3 - Full Services Paid</p> <p><input type="checkbox"/> TP4 - Gas Paid</p>	<p><input type="checkbox"/> TP5 - Glass Repairs Paid</p> <p><input type="checkbox"/> TP6 - Janitorial Paid</p> <p><input type="checkbox"/> TP7 - LawnCare Paid</p> <p><input type="checkbox"/> TP8 - Maintenance/Repairs Paid</p> <p><input type="checkbox"/> TP9 - None</p> <p><input type="checkbox"/> TP10 - Over Tenant Deduct. Paid</p> <p><input type="checkbox"/> TP11 - Property Taxes Paid</p> <p><input type="checkbox"/> TP12 - Roof Repairs Paid</p> <p><input type="checkbox"/> TP13 - Sewer Paid</p> <p><input type="checkbox"/> TP14 - Structural Repairs Paid</p> <p><input type="checkbox"/> TP15 - Trash Removal Paid</p> <p><input type="checkbox"/> TP16 - Water Paid</p>
--	--	---

Special Sale Type Disclosure: _____

We/All of the undersigned state that to the best of our knowledge and belief, the information herein is true and accurate at the time of signature:
*Owner Signature: _____ Phone: _____
*Owner Signature: _____ Phone: _____
*Broker Signature: _____ Phone: _____
*Broker Signature: _____ Phone: _____