



BROKER LISTING COOPERATIVE®

Multi-Family Profile Sheet

Agent / Office Info

(R) List Agent ID	List Agent Name
_____	_____
Showings Phone Number	Feedback Phone Number
____ / ____ / ____	____ / ____ / ____
Feedback Email (enter ONLY if different than the list agent email address)	

Team Leader ID	Team Leader Name
_____	_____

Co-Agent ID	Co-Agent Name
_____	_____

Contact #1 Type (Choose up to 2)

<input type="checkbox"/> Appointment Center	<input type="checkbox"/> Management Company
<input type="checkbox"/> Auction	<input type="checkbox"/> Model
<input type="checkbox"/> CSS Online	<input type="checkbox"/> Team Name
<input type="checkbox"/> Feedback	<input type="checkbox"/> Other

Contact #1 Name _____ Contact #1 Phone ____ / ____ / ____

Contact #2 Type (Choose up to 2)

<input type="checkbox"/> Appointment Center	<input type="checkbox"/> Management Company
<input type="checkbox"/> Auction	<input type="checkbox"/> Model
<input type="checkbox"/> CSS Online	<input type="checkbox"/> Team Name
<input type="checkbox"/> Feedback	<input type="checkbox"/> Other

Contact #2 Name _____ Contact #2 Phone ____ / ____ / ____

Contract Info: Listing Information

(R) Transaction Type (Choose sale or lease)	(R) List Date ____ / ____ / ____	(R) Expiration Date ____ / ____ / ____	(R) List/Lease Price \$ _____
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<input type="checkbox"/> Auction
<input type="checkbox"/> Exchange
<input type="checkbox"/> Lease
<input type="checkbox"/> Lease w/Option to Buy
<input type="checkbox"/> Sale
<input type="checkbox"/> Sale/Lease Back

Disclosures (Choose 1)
(Required if Affected by Disclosures is yes)

<input type="checkbox"/> Bank Owned
<input type="checkbox"/> HUD-Owned
<input type="checkbox"/> VA-Owned
<input type="checkbox"/> Corporate Owned
<input type="checkbox"/> Relocation Controlled
<input type="checkbox"/> Relocation Owned
<input type="checkbox"/> Not Applicable

Inspections / Warranties (Choose up to 3)

<input type="checkbox"/> Environmental	<input type="checkbox"/> Lead-Based Paint
<input type="checkbox"/> General	<input type="checkbox"/> Warranty - Builders
<input type="checkbox"/> Inspection - Mechanical	<input type="checkbox"/> Warranty - Homebuyer
<input type="checkbox"/> Inspection - Radon	<input type="checkbox"/> Water Test - Bacteria
<input type="checkbox"/> Inspection - Septic	<input type="checkbox"/> Water Test - Lead
<input type="checkbox"/> Inspection - Structural	<input type="checkbox"/> Other / See Remarks
<input type="checkbox"/> Inspection - Termite	<input type="checkbox"/> Not Applicable
<input type="checkbox"/> Inspection - Test Well	

(R) Listing Type (Choose 1)

<input type="checkbox"/> One Party
<input type="checkbox"/> Exclusive Agency
<input type="checkbox"/> Exclusive Right to Lease
<input type="checkbox"/> Exclusive Right to Sell
<input type="checkbox"/> Exclusive Right to Sell with Exclusions

(R) Property SubType (Choose 1)

<input type="checkbox"/> 1-4 Units Residential
<input type="checkbox"/> 5+ Units Commercial

(R) # of Units

Property Attached?
 Yes No

REO/Relocation?
 Yes No

(R) Affected by Disclosures?
 Yes No

Disclosure Other (Choose up to 5)

<input type="checkbox"/> Special Addendum	<input type="checkbox"/> Historic District
<input type="checkbox"/> Agent Owned	<input type="checkbox"/> Income Restrictions
<input type="checkbox"/> As-Is	<input type="checkbox"/> Package
<input type="checkbox"/> Assessments Other	<input type="checkbox"/> Pre-Foreclosure
<input type="checkbox"/> Auction	<input type="checkbox"/> Probate
<input type="checkbox"/> Assessment Barrett	<input type="checkbox"/> Receivorship
<input type="checkbox"/> Bankruptcy	<input type="checkbox"/> Refusal to Sell
<input type="checkbox"/> Cosmetics Needed	<input type="checkbox"/> Rental Restrictions
<input type="checkbox"/> Covenants & Restrictions	<input type="checkbox"/> Rules & Regulations
<input type="checkbox"/> Defects / Call Office	<input type="checkbox"/> Sales Disclosure Not Required
<input type="checkbox"/> Defects / None Noted	<input type="checkbox"/> Sales Disclosure on File
<input type="checkbox"/> Defects / See Remarks	<input type="checkbox"/> Sales Disclosure See Media
<input type="checkbox"/> Shared Driveway	<input type="checkbox"/> Short Sale Approved
<input type="checkbox"/> Estate	<input type="checkbox"/> Short Sale Possible
<input type="checkbox"/> Exclude Call Office	<input type="checkbox"/> Tap Fee
<input type="checkbox"/> Fixer Upper	<input type="checkbox"/> Updating Needed
<input type="checkbox"/> Flood Insurance Required	<input type="checkbox"/> 55+ Community
<input type="checkbox"/> Flood Plain	<input type="checkbox"/> None
<input type="checkbox"/> Flood Plain Partial	<input type="checkbox"/> Other / See Remarks
<input type="checkbox"/> Foreclosure	<input type="checkbox"/> Not Applicable

(R) Possession (Choose up to 2)

<input type="checkbox"/> Closing, At
<input type="checkbox"/> Date, Specific
<input type="checkbox"/> Negotiable
<input type="checkbox"/> Other Home, Upon Possession of
<input type="checkbox"/> Rent Back, Per Diem
<input type="checkbox"/> Tenant's Rights
<input type="checkbox"/> Other/See Remarks

Contract Info: Internet

(R) Available for Showing
 Yes No

(R) Available for Showing Date
 ____ / ____ / ____

(R) Is there Direct Soliciting?
 Is there a "For Sale by Owner" or other sign or notice on the property indicating the seller is soliciting direct contact from buyers?
 Yes No

Allow Listing on Public Internet?
 Yes No

Allow Address on Public Internet?
 (Required if on public internet)
 Yes No

Allow Property Description on Internet?
 (Required if on public internet)
 Yes No

Prohibit Comments or Reviews On Public Internet?
 (Required if on public internet)
 Yes No

Prohibit Automated Estimates of Market Value on Public Internet?
 (Required if on public internet)
 Yes No

Syndication Websites

<input type="checkbox"/> MIBOR.com	<input type="checkbox"/> REALTOR.com	<input type="checkbox"/> Homes.com	<input type="checkbox"/> Zillow Group	<input type="checkbox"/> No Listing Syndication
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Cooperation / Compensation

(R) BAC (%/\$)
 Percentage
 Dollar Amount
 First Month's Rent

(R) Buyer Agency Commission

(R) Variable Rate Commission
 Yes No

Location

(R) Street Number

Street Direction

<input type="checkbox"/> East	<input type="checkbox"/> South
<input type="checkbox"/> North	<input type="checkbox"/> Stheast
<input type="checkbox"/> Northeast	<input type="checkbox"/> Sthwest
<input type="checkbox"/> Northwest	<input type="checkbox"/> West

(R) Street Name

Street Type

<input type="checkbox"/> Avenue	<input type="checkbox"/> Hollow	<input type="checkbox"/> Point
<input type="checkbox"/> Bend	<input type="checkbox"/> Lake	<input type="checkbox"/> Ridge
<input type="checkbox"/> Boulevard	<input type="checkbox"/> Landing	<input type="checkbox"/> Road
<input type="checkbox"/> Circle	<input type="checkbox"/> Lane	<input type="checkbox"/> Roundabout
<input type="checkbox"/> Court	<input type="checkbox"/> Manor	<input type="checkbox"/> Row
<input type="checkbox"/> Cove	<input type="checkbox"/> Overlook	<input type="checkbox"/> Run
<input type="checkbox"/> Creek	<input type="checkbox"/> Park	<input type="checkbox"/> Square
<input type="checkbox"/> Crescent	<input type="checkbox"/> Parkway	<input type="checkbox"/> Street
<input type="checkbox"/> Crest	<input type="checkbox"/> Pass	<input type="checkbox"/> Terrace
<input type="checkbox"/> Crossing	<input type="checkbox"/> Path	<input type="checkbox"/> Trace
<input type="checkbox"/> Drive	<input type="checkbox"/> Pike	<input type="checkbox"/> Trail
<input type="checkbox"/> Grove	<input type="checkbox"/> Place	<input type="checkbox"/> Way
<input type="checkbox"/> Highway	<input type="checkbox"/> Plaza	

Street Direction Suffix

<input type="checkbox"/> East	<input type="checkbox"/> South
<input type="checkbox"/> North	<input type="checkbox"/> Stheast
<input type="checkbox"/> Northeast	<input type="checkbox"/> Sthwest
<input type="checkbox"/> Northwest	<input type="checkbox"/> West

(R) Area _____ (R) City _____ (R) State I N

(R) Zip Code _____ +4 (Zip Code) _____

(R) County _____ (R) Township _____ (R) Lot Number _____ Section _____

(R) Lot Size (Sq. Ft.)

Total # Acres

Acres

<input type="checkbox"/> <0.25 Acre	<input type="checkbox"/> 5 - 9.99 Acres
<input type="checkbox"/> 0.25 - 0.49 Acre	<input type="checkbox"/> 10 - 19.99 Acres
<input type="checkbox"/> 0.50 - 0.99 Acre	<input type="checkbox"/> >20 Acres
<input type="checkbox"/> 1 - 2.99 Acres	<input type="checkbox"/> Condo-HPR-CoOp
<input type="checkbox"/> 3 - 4.99 Acres	

(R) Subdivision

(R) Legal

(R) School District _____ School #1 (Up to 4) _____ School #2 (Up to 4) _____ School #3 (Up to 4) _____ School #4 (Up to 4) _____

General

(R) Tax ID #
 |__|_| - |__|_| - |__|_| - |__|_|_| - |__|_|_| . |__|_|_| - |__|_|_|

(R) Conversion
 Yes No

Multiple Tax ID #
 |__|_| - |__|_| - |__|_| - |__|_|_| - |__|_|_| . |__|_|_| - |__|_|_|

(R) Year Built

(R) New Construction

<input type="checkbox"/> No - Resale
<input type="checkbox"/> Proposed
<input type="checkbox"/> Yes - Permit Filed

Construction Stage (Required if new construction)

<input type="checkbox"/> Completed	<input type="checkbox"/> Permit Filed
<input type="checkbox"/> Conversion	<input type="checkbox"/> Resale
<input type="checkbox"/> Foundation In	<input type="checkbox"/> Trim Stage
<input type="checkbox"/> Framed	<input type="checkbox"/> Under Roof
<input type="checkbox"/> Gutted	<input type="checkbox"/> Other/See Remarks
<input type="checkbox"/> Interior Selections, Make	

Builder Project / Contractor Name
 (Required if new construction)

Estimated Completion Date (MM/YY)
 (Required if new construction)
 ____ / ____ / ____

General : Remarks

(R) Directions (210 Characters)

Property Description (No Contact or Financing Information) (1000 Characters)

Agent Remarks (500 Characters)

General: Virtual Tour / Web Link Information

Branded Virtual Tour URL http:// Web URL http://
 Unbranded Virtual Tour URL http:// HOA URL http://
 Interactive Virtual Tour URL http://

Taxes

(R) Semi-Annual Tax \$ _____ Insurance Expense per SqFt _____
 (R) Tax Year Due/Payable _____ Common Area Maint. Fee _____
 (R) Solid Waste Yes No Common Area Maint. Per SqFt _____
 Investment Yes No

Tax Exemption (Choose up to 3)	
<input type="checkbox"/> Historic Tax Credit	
<input type="checkbox"/> Homestead Tax Exemption	
<input type="checkbox"/> Homestead Tax Exemption Filed, Not Reflected	
<input type="checkbox"/> Mortgage Tax Exemption	
<input type="checkbox"/> Mortgage Tax Exemption Filed, Not Reflected	
<input type="checkbox"/> Veteran Tax Exemption	
<input type="checkbox"/> Other Tax Exemption / See Remarks	
<input type="checkbox"/> None	

Finance

<p>(R) Expenses _____</p> <p>Operating Expense (Choose up to 5)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td><input type="checkbox"/> Accounting</td><td><input type="checkbox"/> Payroll</td></tr> <tr><td><input type="checkbox"/> Advertising</td><td><input type="checkbox"/> Property Taxes</td></tr> <tr><td><input type="checkbox"/> Insurance</td><td><input type="checkbox"/> Repairs</td></tr> <tr><td><input type="checkbox"/> License / Permits</td><td><input type="checkbox"/> Utilities</td></tr> <tr><td><input type="checkbox"/> Maintenance</td><td><input type="checkbox"/> Other/See Remarks</td></tr> <tr><td><input type="checkbox"/> Management</td><td></td></tr> </table> <p>Insurance Expense _____</p>	<input type="checkbox"/> Accounting	<input type="checkbox"/> Payroll	<input type="checkbox"/> Advertising	<input type="checkbox"/> Property Taxes	<input type="checkbox"/> Insurance	<input type="checkbox"/> Repairs	<input type="checkbox"/> License / Permits	<input type="checkbox"/> Utilities	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Other/See Remarks	<input type="checkbox"/> Management		<p>(R) Gross Operating Income _____</p> <p>Net Operating Income _____</p> <p>Gross Potential Rent _____</p> <p>Gross Rent Multiplier _____</p>	<p>Owner Pays (Choose up to 8)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td><input type="checkbox"/> Alarm Security</td><td><input type="checkbox"/> HOA Fee</td><td><input type="checkbox"/> Property Taxes</td></tr> <tr><td><input type="checkbox"/> Cable</td><td><input type="checkbox"/> Hazard Insurance</td><td><input type="checkbox"/> Sewer</td></tr> <tr><td><input type="checkbox"/> Carpet Clean</td><td><input type="checkbox"/> Liability Insurance</td><td><input type="checkbox"/> Trash Pickup</td></tr> <tr><td><input type="checkbox"/> Mandatory Dues</td><td><input type="checkbox"/> Renters Insurance</td><td><input type="checkbox"/> All Utilities</td></tr> <tr><td><input type="checkbox"/> Electric</td><td><input type="checkbox"/> Structural Insurance</td><td><input type="checkbox"/> No Utilities</td></tr> <tr><td><input type="checkbox"/> Garage Carport</td><td><input type="checkbox"/> Lawncare</td><td><input type="checkbox"/> Water</td></tr> <tr><td><input type="checkbox"/> Gas</td><td><input type="checkbox"/> Oil</td><td><input type="checkbox"/> Other/See Remarks</td></tr> <tr><td></td><td></td><td><input type="checkbox"/> Not Applicable</td></tr> </table> <p>Tenant Pays (Choose up to 8)</p> <table border="1" style="width: 100%; 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Possible Financing (Choose up to 4)

<input type="checkbox"/> Assume Approval	<input type="checkbox"/> Conventional, Insured (ICON)	<input type="checkbox"/> Lease Purchase	<input type="checkbox"/> See Remarks
<input type="checkbox"/> Assume No Approval	<input type="checkbox"/> Exchange, 1031	<input type="checkbox"/> Lease with Option	<input type="checkbox"/> Not Applicable
<input type="checkbox"/> Cash Only	<input type="checkbox"/> Farmers Home Loan Admin (FarmHA)	<input type="checkbox"/> Rehab, 203K	
<input type="checkbox"/> Closing Costs, Seller Will Pay	<input type="checkbox"/> Federal Housing Administration (FedHA)	<input type="checkbox"/> U S Dept Agriculture Rural Housing (USDA)	
<input type="checkbox"/> Contract / Private	<input type="checkbox"/> Income Restrictions	<input type="checkbox"/> Veteran Administration (VA)	
<input type="checkbox"/> Conventional	<input type="checkbox"/> Indiana Housing Finance Authority (IHFA)	<input type="checkbox"/> Other	

Units

Total SqFt _____

(R) SqFt Source

<input type="checkbox"/> Appraisal	<input type="checkbox"/> Builder
<input type="checkbox"/> Assessor	<input type="checkbox"/> Floorplans
<input type="checkbox"/> Broker	

Total # Rooms (All Units) _____

Total # Beds (All Units) _____

Total # Baths (All Units) _____

(R) Unit # _____	(R) Rent _____	(R) Rent Frequency <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly	(R) # Rooms _____	(R) # Beds _____	(R) # Baths _____
(R) # Levels _____	(R) SqFt _____	(R) Kitchen Dimensions x	(R) Master Bed Dimensions x		

(R) Unit # _____	(R) Rent _____	(R) Rent Frequency <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly	(R) # Rooms _____	(R) # Beds _____	(R) # Baths _____
(R) # Levels _____	(R) SqFt _____	(R) Kitchen Dimensions x	(R) Master Bed Dimensions x		

(R) Unit # _____	(R) Rent _____	(R) Rent Frequency <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly	(R) # Rooms _____	(R) # Beds _____	(R) # Baths _____
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(R) Unit # _____	(R) Rent _____	(R) Rent Frequency <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly	(R) # Rooms _____	(R) # Beds _____	(R) # Baths _____
(R) # Levels _____	(R) SqFt _____	(R) Kitchen Dimensions x	(R) Master Bed Dimensions x		

Utilities (Choose up to 5)

<input type="checkbox"/> CI Central Air	<input type="checkbox"/> Heat Hot Water
<input type="checkbox"/> CI Heat Pump	<input type="checkbox"/> Heat Heat Pump
<input type="checkbox"/> CINone	<input type="checkbox"/> Heat Other
<input type="checkbox"/> CI Wall Unit	<input type="checkbox"/> Heat Radiant
<input type="checkbox"/> CI Wind Unit	<input type="checkbox"/> Heat Steam
<input type="checkbox"/> Fuel Electric	<input type="checkbox"/> Hot Water Electric
<input type="checkbox"/> Fuel Gas	<input type="checkbox"/> Hot Water Gas
<input type="checkbox"/> Fuel Oil	<input type="checkbox"/> Hot Water Oil
<input type="checkbox"/> Fuel Other	<input type="checkbox"/> Hot Water Other
<input type="checkbox"/> Heat Baseboard	<input type="checkbox"/> Hot Water Propane
<input type="checkbox"/> Heat Forced Air	<input type="checkbox"/> Other
<input type="checkbox"/> Heat Grav	

Miscellaneous (Choose up to 5)

<input type="checkbox"/> Dishwasher	<input type="checkbox"/> Other
<input type="checkbox"/> Disposal	<input type="checkbox"/> Range Oven
<input type="checkbox"/> Dryer	<input type="checkbox"/> Refrigerator
<input type="checkbox"/> Eat In Kitchen	<input type="checkbox"/> Washer
<input type="checkbox"/> Fireplace	<input type="checkbox"/> Water Softener Paid
<input type="checkbox"/> Laundry Connection	<input type="checkbox"/> Water Softener Rent
<input type="checkbox"/> No Equipment	

Features

Building Type

<input type="checkbox"/> Apartment Building	<input type="checkbox"/> Industrial Park
<input type="checkbox"/> Apartment Complex	<input type="checkbox"/> Strip Center
<input type="checkbox"/> Double Duplex	<input type="checkbox"/> Triplex
<input type="checkbox"/> Fourplex	<input type="checkbox"/> Townhouse
<input type="checkbox"/> Freestanding	

Building Levels (Choose up to 2)

<input type="checkbox"/> One	<input type="checkbox"/> Four +
<input type="checkbox"/> Two	<input type="checkbox"/> Basement
<input type="checkbox"/> Three	<input type="checkbox"/> Other

Gross Area SqFt _____

Road Frontage Ft. _____

Architectural Style (Choose up to 2)

<input type="checkbox"/> A-Frame	<input type="checkbox"/> Italianate
<input type="checkbox"/> Arts & Crafts/Craftsman	<input type="checkbox"/> Log/Chalet
<input type="checkbox"/> Bungalow/Shotgun	<input type="checkbox"/> Manufactured/Modular
<input type="checkbox"/> Cape Code	<input type="checkbox"/> Mid-Century Modern
<input type="checkbox"/> Chateau	<input type="checkbox"/> Multi-Level
<input type="checkbox"/> Colonial	<input type="checkbox"/> National/Farmhouse
<input type="checkbox"/> Contemporary	<input type="checkbox"/> Other
<input type="checkbox"/> Dutch Colonial	<input type="checkbox"/> Prairie
<input type="checkbox"/> Earth Home	<input type="checkbox"/> Ranch
<input type="checkbox"/> English/Tudor	<input type="checkbox"/> Rustic
<input type="checkbox"/> Federal/Georgian	<input type="checkbox"/> Spanish
<input type="checkbox"/> French	<input type="checkbox"/> Traditional American
<input type="checkbox"/> Gothic/Greek Revival	<input type="checkbox"/> Victorian

Amenities (42 Characters) _____

Roof (42 Characters) _____

HVAC (25 Characters) _____

Foundation

(Choose up to 2)

<input type="checkbox"/> Basement Block
<input type="checkbox"/> Basement Brick
<input type="checkbox"/> Basement Poured Concrete
<input type="checkbox"/> Basement Wood
<input type="checkbox"/> Concrete Poured
<input type="checkbox"/> Crawl
<input type="checkbox"/> Crawl Block
<input type="checkbox"/> Crawl Brick
<input type="checkbox"/> Crawl Poured Concrete
<input type="checkbox"/> Crawl Wood
<input type="checkbox"/> Full
<input type="checkbox"/> Partial
<input type="checkbox"/> Rock
<input type="checkbox"/> Slab
<input type="checkbox"/> Stone
<input type="checkbox"/> Wall Brick
<input type="checkbox"/> Wall Block Concrete
<input type="checkbox"/> Wood
<input type="checkbox"/> Other
<input type="checkbox"/> See Remarks

Unit Parking

(Choose up to 4)

<input type="checkbox"/> Covered
<input type="checkbox"/> 1 Car Garage
<input type="checkbox"/> 2+ Car Garage
<input type="checkbox"/> Guest Parking
<input type="checkbox"/> On Street
<input type="checkbox"/> Parking Garage
<input type="checkbox"/> Parking Lot
<input type="checkbox"/> Paved Area
<input type="checkbox"/> Space 1 Car
<input type="checkbox"/> Space 2+ Car
<input type="checkbox"/> Underground
<input type="checkbox"/> Paved
<input type="checkbox"/> Other

Building Utilities

(Choose up to 8)

<input type="checkbox"/> Electric
<input type="checkbox"/> Separate Electric Meter
<input type="checkbox"/> Separate Gas Meter
<input type="checkbox"/> Sewer
<input type="checkbox"/> Water
<input type="checkbox"/> Well
<input type="checkbox"/> Cable Available
<input type="checkbox"/> Cable Connected
<input type="checkbox"/> Gas Available
<input type="checkbox"/> Gas Connected
<input type="checkbox"/> Municipal Storm Available
<input type="checkbox"/> Municipal Sewer Available
<input type="checkbox"/> Municipal Sewer Connected
<input type="checkbox"/> Municipal Water Available
<input type="checkbox"/> Municipal Water Connected
<input type="checkbox"/> Private Well
<input type="checkbox"/> Private Sewer Connection
<input type="checkbox"/> Septic System
<input type="checkbox"/> Storm Pump
<input type="checkbox"/> Other

Building Information

(Choose up to 4)

<input type="checkbox"/> Burglar Alarm
<input type="checkbox"/> Fire Alarm
<input type="checkbox"/> Smoke Alarm
<input type="checkbox"/> All Furnished
<input type="checkbox"/> Some Furnished
<input type="checkbox"/> Handicap Accessible
<input type="checkbox"/> Security System
<input type="checkbox"/> Sprinkler System
<input type="checkbox"/> Storage
<input type="checkbox"/> Other

Laundry

(Choose up to 2)

<input type="checkbox"/> Common
<input type="checkbox"/> All Connections
<input type="checkbox"/> No Connections
<input type="checkbox"/> No Laundry
<input type="checkbox"/> Other

Features Continued

Exterior
(Choose up to 2)

<input type="checkbox"/>	Aluminum
<input type="checkbox"/>	Brick
<input type="checkbox"/>	Cedar
<input type="checkbox"/>	Concrete Block
<input type="checkbox"/>	Composition Siding Cement
<input type="checkbox"/>	Composition Siding Wood
<input type="checkbox"/>	Cultured Stone
<input type="checkbox"/>	Driviv Type
<input type="checkbox"/>	Shake Shingles
<input type="checkbox"/>	Stone
<input type="checkbox"/>	Stucco Style
<input type="checkbox"/>	Vinyl
<input type="checkbox"/>	Vinyl with Brick
<input type="checkbox"/>	Vinyl with Stone
<input type="checkbox"/>	Wood
<input type="checkbox"/>	Wood with Brick
<input type="checkbox"/>	Wood with Stone
<input type="checkbox"/>	Other / See Remarks

Exterior Amenities
(Choose up to 2)

<input type="checkbox"/>	Clubhouse	<input type="checkbox"/>	Pool Above Ground
<input type="checkbox"/>	Driveway Asphalt	<input type="checkbox"/>	Pool Below Ground
<input type="checkbox"/>	Driveway Concrete	<input type="checkbox"/>	Pool Community
<input type="checkbox"/>	Driveway Exposed Aggregate	<input type="checkbox"/>	Pool House
<input type="checkbox"/>	Driveway Gravel	<input type="checkbox"/>	Pool Indoor
<input type="checkbox"/>	Driveway Pavers	<input type="checkbox"/>	Pool lap
<input type="checkbox"/>	Fence Complete	<input type="checkbox"/>	Putting Green
<input type="checkbox"/>	Fence Full Rear	<input type="checkbox"/>	Shed Storage
<input type="checkbox"/>	Fence Partial	<input type="checkbox"/>	Sprinkler / Irrigation System
<input type="checkbox"/>	Fence Privary	<input type="checkbox"/>	Community Tennis
<input type="checkbox"/>	Firepit Outdoors	<input type="checkbox"/>	Tennis Court
<input type="checkbox"/>	Handicap Accessible	<input type="checkbox"/>	Water Feature Fountain
<input type="checkbox"/>	Planned Not Completed	<input type="checkbox"/>	Not Applicable
<input type="checkbox"/>	Playset		

Lot Information
(Choose up to 5)

<input type="checkbox"/>	Alley Access	<input type="checkbox"/>	On Reservoir
<input type="checkbox"/>	Street Access	<input type="checkbox"/>	Riverfront
<input type="checkbox"/>	Busline	<input type="checkbox"/>	Sidewalks
<input type="checkbox"/>	Corner	<input type="checkbox"/>	Storm Sewer
<input type="checkbox"/>	Creek on Property	<input type="checkbox"/>	Street Lights
<input type="checkbox"/>	Cul-de-sac	<input type="checkbox"/>	Not in Subdivision
<input type="checkbox"/>	Curbs	<input type="checkbox"/>	Subdivision in Rural
<input type="checkbox"/>	Dock Access	<input type="checkbox"/>	Subdivision no Rural
<input type="checkbox"/>	Dock Leased	<input type="checkbox"/>	Suburban
<input type="checkbox"/>	Dock Owned	<input type="checkbox"/>	On Trail
<input type="checkbox"/>	Gated Community	<input type="checkbox"/>	Tree Mature
<input type="checkbox"/>	Golf Course On	<input type="checkbox"/>	Tree Small
<input type="checkbox"/>	Irregular	<input type="checkbox"/>	Variance
<input type="checkbox"/>	Lakefront	<input type="checkbox"/>	Water Access
<input type="checkbox"/>	Pond	<input type="checkbox"/>	Water View

(R) Zoning _____

Garages _____

Basement
 Yes No

Interstate
(Choose up to 2)

Auto Parking _____

Carports _____

Ratio of Spaces to Units _____

<input type="checkbox"/>	Ramp <1 Mile
<input type="checkbox"/>	Ramp 1-3 Miles
<input type="checkbox"/>	Ramp 3-5 Miles
<input type="checkbox"/>	Ramp >5 Miles
<input type="checkbox"/>	Visible

Auto Parking Surface _____

(R) Road Access
(Choose up to 2)

<input type="checkbox"/>	Access Limited
<input type="checkbox"/>	Easement Access
<input type="checkbox"/>	Highway State
<input type="checkbox"/>	Highway US
<input type="checkbox"/>	Interstate
<input type="checkbox"/>	Landlocked
<input type="checkbox"/>	Road Access
<input type="checkbox"/>	Road County
<input type="checkbox"/>	Road Frontage
<input type="checkbox"/>	Road Private
<input type="checkbox"/>	Street City
<input type="checkbox"/>	Street Cuts
<input type="checkbox"/>	See Remarks
<input type="checkbox"/>	Not Applicable

Road Surface
(Choose up to 2)

<input type="checkbox"/>	Asphalt
<input type="checkbox"/>	Concrete
<input type="checkbox"/>	Dirt
<input type="checkbox"/>	Gravel
<input type="checkbox"/>	Tar-Chip
<input type="checkbox"/>	See Remarks
<input type="checkbox"/>	Not Applicable

Road Frontage
(Choose up to 2)

<input type="checkbox"/>	Highway State
<input type="checkbox"/>	Highway US
<input type="checkbox"/>	Interstate
<input type="checkbox"/>	Landlocked
<input type="checkbox"/>	Road County
<input type="checkbox"/>	Road Frontage
<input type="checkbox"/>	Road Privacy
<input type="checkbox"/>	Road State
<input type="checkbox"/>	Street City
<input type="checkbox"/>	See Remarks
<input type="checkbox"/>	Not Applicable

Documents on File
(Choose up to 6)

<input type="checkbox"/>	ADA	<input type="checkbox"/>	Perc Test
<input type="checkbox"/>	Aerial Photo	<input type="checkbox"/>	Survey Staked
<input type="checkbox"/>	Air Rights	<input type="checkbox"/>	Survey Soil
<input type="checkbox"/>	Building Permit	<input type="checkbox"/>	Survey Wetland
<input type="checkbox"/>	Covenants	<input type="checkbox"/>	Traffic Cnt
<input type="checkbox"/>	Covenants & Restrictions	<input type="checkbox"/>	Unknown
<input type="checkbox"/>	Deed Restrictions	<input type="checkbox"/>	Water Well Test
<input type="checkbox"/>	Demographic	<input type="checkbox"/>	See Remarks
<input type="checkbox"/>	Environmental Assessment	<input type="checkbox"/>	None
<input type="checkbox"/>	Legal Description	<input type="checkbox"/>	Other
<input type="checkbox"/>	Map Available Topographic	<input type="checkbox"/>	Not Applicable
<input type="checkbox"/>	Other Restrictions		

(R) Present Use
(Choose 1)

<input type="checkbox"/>	Retail	<input type="checkbox"/>	Commercial Single Tenant
<input type="checkbox"/>	Vacant	<input type="checkbox"/>	Industrial
<input type="checkbox"/>	Agriculture	<input type="checkbox"/>	Medical
<input type="checkbox"/>	Apartment <20	<input type="checkbox"/>	Office
<input type="checkbox"/>	Apartment >20	<input type="checkbox"/>	Resident
<input type="checkbox"/>	Auto Dealer	<input type="checkbox"/>	Restaurant
<input type="checkbox"/>	Auto Gas	<input type="checkbox"/>	Specific Use Government
<input type="checkbox"/>	Auto Miscellaneous	<input type="checkbox"/>	Specific Use Park
<input type="checkbox"/>	Church	<input type="checkbox"/>	Specific Use Recreation
<input type="checkbox"/>	Commercial Multi-Tenant	<input type="checkbox"/>	Other / See Remarks

Proposed Use
(Choose up to 4)

<input type="checkbox"/>	Agriculture	<input type="checkbox"/>	Medical
<input type="checkbox"/>	Apartment <20	<input type="checkbox"/>	Office
<input type="checkbox"/>	Apartment >20	<input type="checkbox"/>	Resident
<input type="checkbox"/>	Auto Dealer	<input type="checkbox"/>	Restaurant
<input type="checkbox"/>	Auto Gas	<input type="checkbox"/>	Specific Use Government
<input type="checkbox"/>	Auto Miscellaneous	<input type="checkbox"/>	Specific Use Park
<input type="checkbox"/>	Church	<input type="checkbox"/>	Specific Use Recreation
<input type="checkbox"/>	Commercial Multi-Tenant	<input type="checkbox"/>	Other / See Remarks
<input type="checkbox"/>	Commercial Single Tenant		
<input type="checkbox"/>	Industrial		

(R) Green Certification
 Yes No

Certifying Organization
(Required if green certified)

Certifying Date
(Required if green certified)

Green Features
(Required if green certified)

<input type="checkbox"/>	Low/No Volatile Organic Compounds (VOC)
<input type="checkbox"/>	Pool - Salt Water
<input type="checkbox"/>	Recycled Materials
<input type="checkbox"/>	Other/See Remarks

Building Certification
(Required if green certified)

<input type="checkbox"/>	Home Energy Rating Service
<input type="checkbox"/>	LEED for Homes
<input type="checkbox"/>	NAHB National Green Bldg Std (ANSI)
<input type="checkbox"/>	Certificate Attached

Energy Efficient Features
(Required if green certified)

<input type="checkbox"/>	Electrical/Lighting	<input type="checkbox"/>	Pool - Solar Heat
<input type="checkbox"/>	Energy Star Doors	<input type="checkbox"/>	Roofing
<input type="checkbox"/>	Energy Star Windows	<input type="checkbox"/>	Water Fixtures
<input type="checkbox"/>	HVAC	<input type="checkbox"/>	Water Heater
<input type="checkbox"/>	Insulation	<input type="checkbox"/>	WaterSense Toilet
<input type="checkbox"/>	Low-E Windows	<input type="checkbox"/>	Other/See Remarks

Auction Information

Auction Company _____

Auction Company License # _____

Auction Manager _____

Auction Manager License # _____

Auction Type _____

Auction Date _____

Auction Time _____