

LAND LISTING INPUT FORM
Items with an *asterisk are required fields

MLS#: _____

General Information

***Status:**

<input type="checkbox"/> Incomplete	<input type="checkbox"/> Active	<input type="checkbox"/> Coming Soon- On Market Date: _____	<input type="checkbox"/> Non-Listed Sold
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Street Number: _____

Street Direction:

<input type="checkbox"/> N	<input type="checkbox"/> NE	<input type="checkbox"/> E	<input type="checkbox"/> SE	<input type="checkbox"/> S	<input type="checkbox"/> SW	<input type="checkbox"/> W	<input type="checkbox"/> NW
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***Street Name:** _____

Street Suffix Type:

<input type="checkbox"/> Avenue	<input type="checkbox"/> Bend	<input type="checkbox"/> Boulevard	<input type="checkbox"/> Circle	<input type="checkbox"/> Court
<input type="checkbox"/> Cove	<input type="checkbox"/> Crest	<input type="checkbox"/> Drive	<input type="checkbox"/> Gardens	<input type="checkbox"/> Glen
<input type="checkbox"/> Green	<input type="checkbox"/> Heights	<input type="checkbox"/> Highway	<input type="checkbox"/> Knoll	<input type="checkbox"/> Landing
<input type="checkbox"/> Lane	<input type="checkbox"/> Loop	<input type="checkbox"/> Manor	<input type="checkbox"/> Meadow	<input type="checkbox"/> Meadows
<input type="checkbox"/> Park	<input type="checkbox"/> Parkway	<input type="checkbox"/> Passage	<input type="checkbox"/> Place	<input type="checkbox"/> Ridge
<input type="checkbox"/> Road	<input type="checkbox"/> Square	<input type="checkbox"/> Street	<input type="checkbox"/> Terrace	<input type="checkbox"/> Trace
<input type="checkbox"/> Trail	<input type="checkbox"/> Way			

Unit #: _____

***County:** _____

***Zip Code:** _____

***List Price:** _____

***Expire Date:** _____

***Subject To:**

<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Agent Owned	<input type="checkbox"/> Auction	<input type="checkbox"/> Corporate Addendum	<input type="checkbox"/> Court Approval
<input type="checkbox"/> HUD Owned	<input type="checkbox"/> Possible Short Sale	<input type="checkbox"/> REO – Bank Owned	<input type="checkbox"/> Approved Short Sale	<input type="checkbox"/> To Be Built

***Town:** _____

***State:** _____

Zip Code + 4: _____

***List Date:** _____

***Property Sub Type:**

<input type="checkbox"/> Commercial	<input type="checkbox"/> Development Potential	<input type="checkbox"/> Lots
<input type="checkbox"/> Mixed use	<input type="checkbox"/> Pasture	<input type="checkbox"/> Recreational

***Parcel ID:** _____

Additional Parcel IDs: _____

***Lot:** _____ ***Block:** _____

***Acres:** _____

Apx. Wooded Acres: _____

Lot Dimensions: _____

***Taxes Amount:** _____

Tax Relief Y/N: ☐ Yes ☐ No

Apx. Open Acres: _____

Apx. Cultivated Acres: _____

Deed Rest/Covenant Y/N: ☐ Yes ☐ No

***Legal:** _____

Zoning:

<input type="checkbox"/> None	<input type="checkbox"/> Agricultural	<input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial
<input type="checkbox"/> Multi Family	<input type="checkbox"/> Other	<input type="checkbox"/> Residential	<input type="checkbox"/> Residential Office

Exclusions: _____

***Subdivision:** _____

***Seller Disclosure YN:** ☐ Yes ☐ No

Contingency:

<input type="checkbox"/> Contact Agent	<input type="checkbox"/> Continue to Show	<input type="checkbox"/> Escape Clause in Contract
<input type="checkbox"/> First Right	<input type="checkbox"/> See Remarks	<input type="checkbox"/> Take Backup Offers

Hrs First Right of Refusal: _____

Financing Available:

<input type="checkbox"/> ARMConv	<input type="checkbox"/> FHA	<input type="checkbox"/> Fixed Conv	<input type="checkbox"/> Other – Specify In Remarks
<input type="checkbox"/> Owner	<input type="checkbox"/> Rural Development	<input type="checkbox"/> VA	

Additional Sub Type:

<input type="checkbox"/> Agriculture	<input type="checkbox"/> Commercial	<input type="checkbox"/> Development Potential	<input type="checkbox"/> Industrial
<input type="checkbox"/> Lots	<input type="checkbox"/> Mixed Use	<input type="checkbox"/> Pasture	<input type="checkbox"/> Recreational
<input type="checkbox"/> Residential			

Virtual Tour Link: _____

Additional Virtual Tour Link: _____

Brokerage Information

***List Agent Name:** _____

***List Office Name:** _____

Co List Agent Name: _____

Co List Office Name: _____

***Agency/Listing Type:**

<input type="checkbox"/> Exclusive Agency	<input type="checkbox"/> Exclusive Right to Sell	<input type="checkbox"/> Limited Service Listing	<input type="checkbox"/> MLS Entry Only
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***Showing Instructions:**

<input type="checkbox"/> 2hr Notice	<input type="checkbox"/> 4hr Notice	<input type="checkbox"/> 12hr Notice	<input type="checkbox"/> 24hr Notice	<input type="checkbox"/> Apmt Only
<input type="checkbox"/> Call Appt Center	<input type="checkbox"/> Call List Office	<input type="checkbox"/> Contact List Agent	<input type="checkbox"/> Key In Office	<input type="checkbox"/> Leavecard
<input type="checkbox"/> List Agent Present	<input type="checkbox"/> Lockbox-Combo	<input type="checkbox"/> Lockbox-SentriLock	<input type="checkbox"/> Lockbox-Supra	<input type="checkbox"/> No Appt. Rqd
<input type="checkbox"/> No Key	<input type="checkbox"/> Occupied	<input type="checkbox"/> Other-Specify In Remarks	<input type="checkbox"/> Pets-See Remarks	<input type="checkbox"/> Sign In
<input type="checkbox"/> Special Situation	<input type="checkbox"/> Tenant Occupied	<input type="checkbox"/> Vacant		

Exempted Name Prospects: ☐ Yes ☐ No

Call to Show: _____

***Allow Address Display:** ☐ Yes ☐ No

***Internet Ok:** ☐ Yes ☐ No

***Allow VOW:** ☐ Yes ☐ No

***Allow Blogging:** ☐ Yes ☐ No

***Allow Auto Valuation:** ☐ Yes ☐ No

Direct Contact: _____

Agent Safety Concerns:

<input type="checkbox"/> No Heat	<input type="checkbox"/> Minimal or No Ext. Lighting	<input type="checkbox"/> Minimal or No Int. Lighting	<input type="checkbox"/> Remote/Limited Visibility from Road
<input type="checkbox"/> Electricity Not On	<input type="checkbox"/> Poor Cell Service	<input type="checkbox"/> Contact List Agent	<input type="checkbox"/> Other

Property Information

***Location:**

<input type="checkbox"/> None	<input type="checkbox"/> Adjacent Golf Course	<input type="checkbox"/> Adjacent National Forest	<input type="checkbox"/> Central Business District
<input type="checkbox"/> Corner Lot	<input type="checkbox"/> Cul-De-Sac	<input type="checkbox"/> Dead End	<input type="checkbox"/> Industrial Park
<input type="checkbox"/> Interior Lot	<input type="checkbox"/> Major Road Frontage	<input type="checkbox"/> Near Country Club	<input type="checkbox"/> Near Trails
<input type="checkbox"/> Neighborhood	<input type="checkbox"/> Neighborhood Business	<input type="checkbox"/> Office Park	<input type="checkbox"/> Other-Specify In Remarks
<input type="checkbox"/> Pond Front	<input type="checkbox"/> Railroad Access	<input type="checkbox"/> Right of Way	<input type="checkbox"/> River/Brook/Stream
<input type="checkbox"/> Rural	<input type="checkbox"/> Shopping Mall	<input type="checkbox"/> Suburban	<input type="checkbox"/> Timberland/Rural
<input type="checkbox"/> Waterfront	<input type="checkbox"/> Wooded/Forrest		

Trail Type:

<input type="checkbox"/> Biking	<input type="checkbox"/> Frontage	<input type="checkbox"/> Greenway	<input type="checkbox"/> Mountain Biking
<input type="checkbox"/> Paved	<input type="checkbox"/> Unpaved	<input type="checkbox"/> Walking	

***Description:**

<input type="checkbox"/> None	<input type="checkbox"/> Curbing	<input type="checkbox"/> Long Term Lease	<input type="checkbox"/> Near Public Transportation
<input type="checkbox"/> No Deed Restriction	<input type="checkbox"/> Other-Specify In Remarks	<input type="checkbox"/> Recreational	<input type="checkbox"/> Sidewalk
<input type="checkbox"/> Will Consider Divide			

of Parking: _____ In City Limits ☐ Yes ☐ No Surveyed: ☐ No ☐ Unknown ☐ Yes

Flood Zone:

<input type="checkbox"/> No	<input type="checkbox"/> Unknown	<input type="checkbox"/> Yes
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Frontage: _____ *Mobile Home Allowed: ☐ Yes ☐ No

Electric:

<input type="checkbox"/> None	<input type="checkbox"/> At Street	<input type="checkbox"/> On Site	<input type="checkbox"/> Other-Specify In Remarks	<input type="checkbox"/> Underground
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Gas:

<input type="checkbox"/> None	<input type="checkbox"/> At Street	<input type="checkbox"/> Natural	<input type="checkbox"/> On Site
<input type="checkbox"/> Other-Specify In Remarks	<input type="checkbox"/> Propane	<input type="checkbox"/> Underground	

***Water/Sewer:**

<input type="checkbox"/> Community Well	<input type="checkbox"/> On Site Septic Existing	<input type="checkbox"/> On Site Septic Needed
<input type="checkbox"/> On Site Well Existing	<input type="checkbox"/> On Site Well Needed	<input type="checkbox"/> Other-Specify In Remarks
<input type="checkbox"/> Public Sewer At Street	<input type="checkbox"/> Public Sewer On Site	<input type="checkbox"/> Public Water At Street
<input type="checkbox"/> Public Water on Site	<input type="checkbox"/> Rural Water – Tap Paid	<input type="checkbox"/> Rural Water – Tap Needed
<input type="checkbox"/> Septic Design Available	<input type="checkbox"/> Soil Test Available	

Internet/TV:

<input type="checkbox"/> None	<input type="checkbox"/> Cable At Street	<input type="checkbox"/> Cable On-Site	<input type="checkbox"/> DSL
<input type="checkbox"/> Fiber Optic	<input type="checkbox"/> Other-Specify In Remarks	<input type="checkbox"/> Satellite	<input type="checkbox"/> Unknown

***Topography:**

<input type="checkbox"/> Exception View	<input type="checkbox"/> Flood Plain	<input type="checkbox"/> Gently Rolling	<input type="checkbox"/> Lake/Pond
<input type="checkbox"/> Lake/Pond/Stream	<input type="checkbox"/> Level	<input type="checkbox"/> Open	<input type="checkbox"/> Other-Specify In Remarks
<input type="checkbox"/> Partially Wooded	<input type="checkbox"/> Rough Rolling	<input type="checkbox"/> Sloping	<input type="checkbox"/> Steep
<input type="checkbox"/> Stream/Creek	<input type="checkbox"/> Wooded		

***Lot Description:**

<input type="checkbox"/> Cleared	<input type="checkbox"/> Consider Subdivide	<input type="checkbox"/> Corner	<input type="checkbox"/> Cul-De-Sac
<input type="checkbox"/> Curbing	<input type="checkbox"/> Forest	<input type="checkbox"/> Hardwoods	<input type="checkbox"/> In Subdivision
<input type="checkbox"/> Landscaped	<input type="checkbox"/> Level	<input type="checkbox"/> Not In Subdivision	<input type="checkbox"/> Open
<input type="checkbox"/> Orchard	<input type="checkbox"/> Other-Specify In Remarks	<input type="checkbox"/> Out of City	<input type="checkbox"/> Resort Property
<input type="checkbox"/> Right of Way	<input type="checkbox"/> Rolling	<input type="checkbox"/> Rural Property	<input type="checkbox"/> Secluded
<input type="checkbox"/> Sidewalk	<input type="checkbox"/> Sloped	<input type="checkbox"/> South Facing	<input type="checkbox"/> Steep
<input type="checkbox"/> Timberland	<input type="checkbox"/> View	<input type="checkbox"/> Vineyard	<input type="checkbox"/> Will Subdivide
<input type="checkbox"/> Wooded	<input type="checkbox"/> Zero Lot Line		

***Fencing:**

<input type="checkbox"/> None	<input type="checkbox"/> 1 Side	<input type="checkbox"/> 2 Side	<input type="checkbox"/> 3 Side
<input type="checkbox"/> Backyard	<input type="checkbox"/> Chain Link	<input type="checkbox"/> Front Yard	<input type="checkbox"/> Front/Rear
<input type="checkbox"/> Iron (Metal)	<input type="checkbox"/> Other-Specify In Remarks	<input type="checkbox"/> Partial	<input type="checkbox"/> Picket
<input type="checkbox"/> Rock Wall	<input type="checkbox"/> Split Rail	<input type="checkbox"/> Total	<input type="checkbox"/> Vinyl
<input type="checkbox"/> Wire	<input type="checkbox"/> Wood Privacy	<input type="checkbox"/> Yes	

Ponds: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 5+ ☐ Yes ☐ Other- Specify in Remarks ☐ No

Water Lake Property:

<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Boat Dock-Lift	<input type="checkbox"/> Co-Owned Boat Dock	<input type="checkbox"/> Community Boat Slip
<input type="checkbox"/> Creek/Stream/Spring	<input type="checkbox"/> Lake Area	<input type="checkbox"/> Lake Front	<input type="checkbox"/> Lake View
<input type="checkbox"/> Pond	<input type="checkbox"/> Private Boat Dock	<input type="checkbox"/> River Front	<input type="checkbox"/> River View
<input type="checkbox"/> Seasonal View	<input type="checkbox"/> Subdivision	<input type="checkbox"/> Wet Weather Creek	<input type="checkbox"/> Zoned for Boat Dock

Lake: _____ ***Surveillance:** ☐ Yes ☐ No **Minerals** ☐ Yes ☐ No

Community Information:

***School District:** _____ **ASO/POA Fee Dues:** _____

Aso/POA Paid Frequency: ☐ None ☐ Annual ☐ Monthly ☐ Quarterly ☐ Semi-Annually

POA Includes:

<input type="checkbox"/> Call Lister	<input type="checkbox"/> Common Utilities	<input type="checkbox"/> Exterior Maintenance	<input type="checkbox"/> Heat	<input type="checkbox"/> Insurance
<input type="checkbox"/> Lawn	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Management	<input type="checkbox"/> Other	<input type="checkbox"/> Security
<input type="checkbox"/> See Remarks	<input type="checkbox"/> Sewer	<input type="checkbox"/> Snow Removal	<input type="checkbox"/> Trash Pick Up	<input type="checkbox"/> TV/Cable

***Roads:**

<input type="checkbox"/> Common	<input type="checkbox"/> County Road	<input type="checkbox"/> Highway	<input type="checkbox"/> No Road
<input type="checkbox"/> Other	<input type="checkbox"/> Private	<input type="checkbox"/> Public	<input type="checkbox"/> Surface Dirt
<input type="checkbox"/> Surface Gravel	<input type="checkbox"/> Surface Paved		

Golf Course:

<input type="checkbox"/> Adjacent	<input type="checkbox"/> Area	<input type="checkbox"/> Golf Front	<input type="checkbox"/> Golf View
<input type="checkbox"/> Near Clubhouse	<input type="checkbox"/> Private	<input type="checkbox"/> Public	<input type="checkbox"/> Subdivision

Flood Insurance Required: ☐ No ☐ Unknown ☐ Yes

Remarks Information

***Directions (1030 Characters):**

Internal Remarks (255 Characters):

***Public Remarks (1030 Characters):**

MLS Remarks (1030 Characters):

Safety Concern Details(250 Characters):

Auction Information

Type: ☐ Absolute ☐ Reserve

Time:

Date:

Location:

Terms/Condition:

Status Change: Information

*Date:	<input type="checkbox"/> Pending	<input type="checkbox"/> Expired	<input type="checkbox"/> Withdrawn	<input type="checkbox"/> Leased/Rented	<input type="checkbox"/> Sold/Closed
*Date:	<input type="checkbox"/> Pending	<input type="checkbox"/> Expired	<input type="checkbox"/> Withdrawn	<input type="checkbox"/> Leased/Rented	<input type="checkbox"/> Sold/Closed
*Date:	<input type="checkbox"/> Pending	<input type="checkbox"/> Expired	<input type="checkbox"/> Withdrawn	<input type="checkbox"/> Leased/Rented	<input type="checkbox"/> Sold/Closed

*Sale Price:

Appraiser Name:

Appraiser Phone:

Buyer Name:

*Selling Agent Name:

*Selling Office:

Co Selling Agent Name:

Co Selling Office: