



Property Address _____ ML# _____

MLS INFORMATION

ML# _____ (System Generated) AP# _____ List Date _____ Expiration Date _____

Street # _____ Direction E/N/S/W Street Name _____ Street Type _____ Unit # _____ (i.e.: Avenue, Street, Alley, Circle)

City _____ Area _____ County _____

State _____ Zip _____ Zip 4 _____
Orange (OR) Ventura (VE) Kern (KE)
Los Angeles (LA) Imperial (IM) Other California County (OT)
Riverside (RI) Santa Barbara (BA) Other State (OS)
San Bernardino (SB) San Luis Obispo (SO) Foreign Country (FC)
San Diego (SD)

TGNO _____ Cross Streets _____ List Price _____ Business Class
Agriculture Retail
Extraction Service
Manufacturing Wholesale

Business Type

- Accountant, Attorney, Auto Sale/Rental, Auto Spcl Equip, Automotive/Service Stations, Beauty Shop, Beauty Supply, Beauty Tanning, Body Shop/Paint, Car Wash, Child Care Related, Clothing, Coin Operated, Communication, Computers, Construction, Convenience Market/Dairy/Supermarket, Distribution/Wholesale, Dry Cleaners, Entertainment, Eye/Hearing Care, Financial, Food Services, Gift/Floral/Card Shop, Hardware, Home Prod Svcs, Janitorial, Laundry-Wash Prs, Liquor Stores, Live Stock, Manufacturing, Medical Related, Motel/Hotel, Motion Picture Inc, Oil/Gas Wells, Other - See Remarks, Party Crafts, Pets, Ranch/Farm, Real Estate, Recreation, Retail, Sand & Gravel, School, Security, Services - General, Services - Office/Professional, Sports, Storage, Taverns/Cocktail Lounges, Transportation, Video Store

Doing Business As _____ DBA Since Date _____ DBA Purchased Date _____

AP# _____ Zoning _____ Listing Agreement Type _____ Service Level _____
Exclusive Agency Exclusive Right To Sell Net Full Service MLS Entry Only
Exclusive Right To Lease Exclusive Right With Exception Open Limited Service
Probate

Have _____ Gross Scheduled Income _____ Motivation _____

Want _____ Form of Ownership _____
Corporation Franchise Partnership SCorporation Sole Proprietorship

Terms _____ Paid by Tenant _____
All Inclusive Trust Deed Cash To New Loan Freddie Mac Owner Will Carry Small Business Ad Trade Electricity
Cal Vet Exchange Land Contract Real Estate Owned Subject to Court Trust Conveyance Gas
Cash Fannie Mae Lse-Opt To Buy Seller Lease Back Subject to Other VA Loan VA No Loan Trash
Cash To Existing Loan FHA Loan Owner May Carry Short Pay/Subject to Lender Submit VA No Loan VA No No Loan Water

Property Description (500 chars max) _____

Real Estate Included Yes / No Lease Type _____ Lease Expiration Date _____ How Long Established _____
Gross Modified Gross Percent Triple Net

With Present Owner _____ Monthly Rent \$ _____ Average Customer Count _____ Parking Spaces _____

Parking Type _____
Above Street Level Parking Available Controlled Entrance None Oversized Garage Tandem
Additional Boat Parking Covered Off Street Porte-Cochere Unassigned Parking
Assigned Parking Built-In Storage Driveway Gate Offsite Parking for Guests Shared Valet Parking
Auto Driveway Gate Circular Driveway Gated Underground Parking Onsite Parking for Guests Street Workshop

Phase _____ Voltage _____ Amps _____ Approx. Total SqFt _____ Price Per SqFt \$ (system generated)

Source of SqFt _____ Lease/SqFt _____ Lot Description _____
Appraiser Estimated Seller Lot 0-9,999 Sq Ft
Assessor Landlord/Lessor/Owner Taped Lot 20,000-39,999 Sq Ft
Builder Other

MLS INFORMATION cont.

Full Time Employees _____ # Part Time Employees _____ # Total Employees _____
 Lease Deposit _____ Percent Lease _____ Owner Works (Hours/Week) _____ Owner Will Train Yes / No
 Renewal Option _____ Days & Hours Open _____
 Equipment Included in Space Rent _____
 Contracted Lease Equipment _____

Storage Facility _____ **® Exterior Construction** _____ **® Roof** _____ **Water** _____
 Average Mark Up _____ Aluminum Cement Board Other Stucco Composition District Private
 Asbestos Concrete Siding Stucco/Brick Composition/Shingle Other Other Well
 Block Flagstone Steel Stucco/Wood Other
 Brick Frame Steel Siding Synthetic Stucco Rock/Stone
 Brick and Wood Glass Stone Unknown Spanish Clay Tile
 Brick/Veneer Manufactured Home Stone and Wood Vinyl Wood Shakes
 Wood
® AC _____ **® Heat** _____ **® ADA Compliant** Yes / No
 Attic Fan No Air Conditioning Baseboard Heat Pump Propane Solar Heat Water **® Handicap Access** Yes / No
 Attic Ventilator Other Electric Hot Water Circulator Radiant Wall Electric
 Ceiling Fan Room Evap Air Floor Furnace Natural Gas Solar Wall Gas
 Central Room Refrig Air Forced air No Heating Solar Heat Other Wood Stove **Dock** Yes / No
 Dual Wall/Window Gravity Heating Other Heating Solar Heat Passive Zoned **® Fire Sprinklers** Yes / No
 Evaporative Zoned **Railroad Access** Yes / No

BALANCE SHEET

Assets **Cash** _____ **Inventory** _____ **Accounts Receivable** _____ **Equipment** _____
Leasehold Improvement _____ **Real Estate** _____ **Other** _____ **Total** _____
 Liabilities **Accounts Payable** _____ **Accrued Expenses** _____ **Long Term Liability** _____
Total _____
Retained Earnings _____

ANNUAL EXPENSES

® Actual Expenses Provided By _____ **Total Rent** _____ **Utilities** _____ **Vehicles** _____
 Accountant Provided Owner Provided
 Limited Information Pro Forma Available
 None Available Tax Return
Insurance _____ **Advertising** _____ **Accounting** _____ **Management** _____
Supplies _____ **Telephone Exp** _____ **Taxes (New)** _____ **Licenses** _____
Equipment Rent _____ **Repairs** _____ **Common Area Maintenance** _____ **Payroll Expense** _____
Payroll Tax Exp _____
Other Expenses 1 _____ **Other Expenses Amt 1** _____
Other Expenses 2 _____ **Other Expenses Amt 2** _____
Other Expenses 3 _____ **Other Expenses Amt 3** _____ **Total Annual Expenses** _____

ANNUAL INCOME STATEMENT

Gross Sales _____ **CFC Gross Profit** _____
Total Expenses _____ **Net Income** _____
Owners Salary Factor + / - **Owners Salary** _____ **Managers Salary Factor** + / - **Managers Salary** _____
Interest Factor + / - **Interest** _____ **Depreciation Factor** + / - **Depreciation** _____
Fringes Factor + / - **Fringes** _____
Other Income Desc _____ **Other Income Amt** _____

PRICE INCLUDES

Goodwill _____ **License** _____ **Equipment** _____ **CNTC** _____
Inventory _____ **MCA** _____ **Lease Value** _____ **Real Estate** _____
Price Includes Other 1 _____ **Other Amount 1** _____ **Price Includes Other 2** _____ **Other Amount 2** _____
Total Price Includes _____ **Down Payment & Close Costs** _____

ROI

Gross Profit _____ **CFC Total Expense** _____ **CFC Principal** _____
CFC Interest _____ **Adjust Net Income** _____ **Debt Service** _____
Cash Flow _____ **Down \$** _____ **CFC ROI** _____

FINANCIAL INFO

Financial Remarks _____

SHOWING INSTRUCTIONS

Showing Instr _____ **S/O Comp** _____ **S/O Comp** %/\$ _____ **Dual/Variable Rate Comm** _____
 Appointment Only Keybox, Vacant
 Call First Restricted Access – Call Listing Agent
 Call Listing Office See Remarks
 Go Direct

Owner Name _____ **Owner Phone** _____

Lock Box Location			Lock Box Type		
Call Listing Office	Gas Meter	Side Door	Supra-SoCalMLS	No Key Safe	Supra-GIVMLS
Front Door	No Key Safe	Side Gate	Call Listing Office	Other-See Remarks	Supra-GSBRMLS
Front Gate	Rear Door	Sign Post	Combo-See Remarks	Supra Key	Supra-MRMLS
Garage Door	See Remarks	Vault	Multacc-GIVMLS	Supra-DAMLS	Supra-Newport
		Water Pipe			Supra-SRAR/BAOR

Gate Code (25 chars max) _____

LISTING OFFICE/AGENT INFO

Board ID _____ **Office Name** _____ **Listing Company ID** _____ **Listing Office ID** _____
(System Generated) (System Generated) (System Generated)
Office Phone _____ **Office Fax** _____ **L Agt Full Name** _____ **L Agt ID** _____
(System Generated) (System Generated) (System Generated)
Agt Preferred Phone _____ **Agt Preferred Phone Ext** _____ **Agt Res Phone** _____
Agt Preferred Fax _____ **L Agt Cell Phone** _____ **L Agt Pager** _____
Voicemail _____ **Voicemail Ext** _____ **L Agt Email** _____
L Agt Website _____

CO-LISTING OFFICE/AGENT INFO

Co-Listing Agt ID _____ **Co-Listing Agt Full Name** _____

Co-Listing Agt Preferred Phone _____ **Co-Listing Agt Preferred Phone Ext** _____

Co-Listing Agt Res Phone _____ **Co-Listing Agt Preferred Fax** _____

Co-Listing Agt Pager _____ **Co-Listing Agt Cell Phone** _____

Co-Listing Agt Voicemail _____ **Co-Listing Agt Voicemail Ext** _____ **Co-Listing Office ID** _____

Co-Listing Agt Email _____

AGENT REMARKS

Agent Remarks (500 chars max) _____

INTERNET INFORMATION

Address on the Internet? Yes/ No **HomeSeekers** Yes/ No **LA Times** Yes/ No **OC Register** Yes/ No **Cyberhomes** Yes/ No

Realtor.com Yes/ No **Homes.com** Yes/ No **IDX** Yes/ No **LA News Group** Yes/ No **Listing Paid** Yes/ No

Broker Lead Yes/ No

LISTING ACTIVITY

List Date _____ **Expiration Date** _____

Change to Pending/Backup Offers/First Right of Refusal

Pending (Projected Sale) Price \$ _____

Projected Close Date _____ *(Listing will auto-sell 14 days after the Projected Date)*

Pending Date _____

Financing _____ **Selling Agent** _____

<ul style="list-style-type: none"> All Inclusive Trust Deed Assumed Cal Vet Cash Conventional FHA Loan Land Contract Other-See Rmks-Call List Office Owner Carried Private Trust Conveyance VA Loan 	<p>Sold Terms _____</p> <ul style="list-style-type: none"> Auction Buyer Concessions Contract Of Sale Exchange/Trade In Foreclosure Lease Option Real Estate Owned Seller Concessions Short Payoff Standard Sale
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CLOSED INFORMATION

Selling Agent _____ **Pending Date** _____

Closed Date _____ **Sales Price** _____

Sold Terms _____ **Financing** _____

<ul style="list-style-type: none"> Auction Buyer Concessions Contract Of Sale Exchange/Trade In Foreclosure Lease Option Real Estate Owned Seller Concessions Short Payoff Standard Sale 	<ul style="list-style-type: none"> All Inclusive Trust Deed Assumed Cal Vet Cash Conventional FHA Loan Land Contract Other-See Rmks-Call List Office Owner Carried Private Trust Conveyance VA Loan
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"The accuracy of all information, including square footage and lot sizes is deemed reliable but not guaranteed and should be independently verified through personal inspection with the appropriate professionals."

Signature _____ Date _____ Signature _____ Date _____

Signature _____ Date _____ Signature _____ Date _____



Payment Authorization for Recip Listings Only Form

Please complete this form only if you are reciprocating a listing to the following MLS'. **California Desert AOR, CLAW, I-tech, Socal MLS and South Bay AOR.**

Date: _____

Address of the Property: _____

City: _____ Zip Code: _____

Listing Agent Name: _____ Phone #: _____

Office Name: _____

Listing Fee \$25.00 (includes one photo)

Listing fee includes 1st *Photo	\$25.00
_____ # of Additional *Photos @ \$5.00 \$ _____	= \$ _____

Type of Credit Card: VISA [] M/C [] AM EXP [] OPTIMA []

Card # _____ Exp. Date _____

Name as it appears on Card _____

I authorize the Association to charge my credit/ATM Card indicated above for my listing. Please make all checks payable to Tricounties.

Signature _____

PHOTOS?

E-mail photo(s) to TricoPhotos@rPartner.net. Please be sure to type in the subject line the listing address or the listing number if you have it.

Photos are attached to this form by Disk, Print or Photo Prints (if you are bringing the photos in person).

***Preferred Fax Number:** _____
Please provide a fax number in case we have questions or your listing is incomplete, thank you!

***Contact Phone Number:** _____
Please provide a phone number in case we have questions or your listing is incomplete, thank you!

Please fax this form along with the reciprocal input listing form to **(909) 594-7156** Attn. MLS Department and if you have any questions about this form please contact us at (909) 594-5992.

Thank you!