

Property Address: _____

City State Zip

Agent Name: _____ Date Listed: _____ Listing Number: _____

*Status <input type="checkbox"/> New *Property Attached <input type="checkbox"/> Yes <input type="checkbox"/> No *Senior Living (55+) <input type="checkbox"/> Yes <input type="checkbox"/> No	*Property Subtype (Replaced Condo/Townhouse/Villa Y/N) <input type="checkbox"/> Apartment <input type="checkbox"/> Manufactured Home <input type="checkbox"/> Villa/Patio Home <input type="checkbox"/> Cabin <input type="checkbox"/> Manufactured on Land <input type="checkbox"/> Condo <input type="checkbox"/> Mobile Home <input type="checkbox"/> Duplex <input type="checkbox"/> Single Family Residence <input type="checkbox"/> Farm <input type="checkbox"/> Townhouse	*Asterisk Denotes Required Field* *Blue Required by 1/7/19 *Green Required by 12/4/18 *Agent ID _____ *Office ID _____ Co-Agent ID _____ Co-Office ID _____
*County _____ *Address# _____ Direction _____ *Street Name _____ *Street Type _____ Post Direction _____ Unit# _____ *City _____ *State _____ *Zip Code _____ *Parcel # _____ Subdivision _____ If County or City is not listed, contact GPRMLS Office		
*Listing Price _____ *List Date _____ (Date on Listing Agrmnt.) *Expiration Date _____	*# Of Fireplaces _____ *Garage Spaces _____ GAR. Garage Type <input type="checkbox"/> 1. Attached <input type="checkbox"/> 4. Tandem <input type="checkbox"/> 7. Off Street Park <input type="checkbox"/> 2. Detached <input type="checkbox"/> 5. Underground <input type="checkbox"/> 8. Heated <input type="checkbox"/> 3. Built-In <input type="checkbox"/> 6. Carport <input type="checkbox"/> 9. None	
*Cats Allowed <input type="checkbox"/> Yes <input type="checkbox"/> No *Dogs Allowed <input type="checkbox"/> Yes <input type="checkbox"/> No *Non-Smoking Unit <input type="checkbox"/> Yes <input type="checkbox"/> No *Lease Terms _____ *Professionally Managed <input type="checkbox"/> Yes <input type="checkbox"/> No *Section 8 Accepted <input type="checkbox"/> Yes <input type="checkbox"/> No *For Sale <input type="checkbox"/> Yes <input type="checkbox"/> No *Purchase Option Available <input type="checkbox"/> Yes <input type="checkbox"/> No *Application Fee: _____ *Deposit Amount: _____ *Date Available: _____	Finished Only *Main Floor SqFt _____ *2nd Floor SqFt _____ *3rd Floor SqFt _____ *Finished Above Grade _____ *Finished Below Grade _____ *Total Finished SqFt (System Calculated) *Square Foot Source <input type="checkbox"/> Assessor <input type="checkbox"/> Other <input type="checkbox"/> Plans *Year Built _____ Basement <input type="checkbox"/> Yes <input type="checkbox"/> No Basement % _____ *Walk Out Basement <input type="checkbox"/> Yes <input type="checkbox"/> No	
*Bedrooms _____ (Conforming Only in terms of egress) *Bathrooms _____ *# Of Rooms _____	Tax Database ID <input type="checkbox"/> CRS Tax - IA <input type="checkbox"/> CRS Tax - NE Tax ID (Auto-filled)	
	*Commission Compensation Code _____	

GENERAL

*School District _____ *Grade Schools _____
 *Jr. High School _____ *High School _____

*Style (Check only one choice)

- 1 Story/Ranch 2.5 Story Raised Ranch
 1.5 Story Bungalow Split Entry
 1.75 Story Multi-Level Tri-Level
 2 Story Other Uncategorized

	Length		Width		Level (1,2,3,B)
Living Room	_____	X	_____	_____	_____
Formal Dining	_____	X	_____	_____	_____
Informal Dining	_____	X	_____	_____	_____
Kitchen	_____	X	_____	_____	_____
Kitchen 2	_____	X	_____	_____	_____
Family Room	_____	X	_____	_____	_____
Great Room	_____	X	_____	_____	_____
Rec Room	_____	X	_____	_____	_____
Office	_____	X	_____	_____	_____
Laundry	_____	X	_____	_____	*
Master Bedroom	_____	X	_____	_____	*
Bedroom 2	_____	X	_____	_____	_____
Bedroom 3	_____	X	_____	_____	_____
Bedroom 4	_____	X	_____	_____	_____
Bedroom 5	_____	X	_____	_____	_____
Bedroom 6	_____	X	_____	_____	_____
Other 1:	_____	X	_____	_____	_____
Other 2:	_____	X	_____	_____	_____
Other 3:	_____	X	_____	_____	_____

Main Floor Bath		2nd Floor Bath		3rd Floor Bath		Below Grade Bath	
Full	_____	Full	_____	Full	_____	Full	_____
3/4	_____	3/4	_____	3/4	_____	3/4	_____
1/2	_____	1/2	_____	1/2	_____	1/2	_____
1/4	_____	1/4	_____	1/4	_____	1/4	_____
Rough In	_____	Rough In	_____	Rough In	_____	Rough In	_____

SHOWING INFORMATION

Showing Contact Type Agent Broker Other Seller Showing Service

*Showing Phone Number _____

*Showing Instructions (500 Char) (Moved from Features) _____

Directions to Property (250) _____

REMARKS

These remarks are to only promote the property. Not allowed: Agent name, phone number, etc.

Public Remarks (1000 Characters Max) (Syndication Remarks are auto populated) _____

These remarks are the ones to be seen by other real estate agents.

Agent Remarks (1000 Characters Max) _____

These remarks are the ones to be seen by other agents within your firm (including all firm branches).

Office Only Remarks (200 Characters Max) _____

FEATURES (CHECK ALL THAT APPLY IN THIS SECTION)

*APP. Appliances Included

- 1. Range
- 2. Oven
- 3. Refrigerator
- 4. Freezer
- 5. Dishwasher
- 6. Disposal
- 7. Compactor
- 8. Microwave
- 9. Indoor Grill
- 10. Ice Maker
- 11. Water Softener
- 12. Washer
- 13. Dryer
- 14. Convection Oven
- 15. Cooktop
- 16. Other
- 17. None

CLG. Cooling

- 1. Central Air
- 2. Window Air
- 3. Heat Pump
- 4. Zoned
- 5. Other
- 6. None

EXF. Exterior Features

- 1. Porch
- 2. Patio
- 3. Enclosed Porch
- 4. Enclosed Patio
- 5. Covered Deck
- 6. Deck/Balcony
- 7. Storm Cellar
- 8. Hot tub/Spa
- 9. Pool In-Ground
- 10. Pool Above Ground
- 11. Dog Run
- 12. Horse Permitted
- 13. Storage Shed
- 14. Out Building
- 15. Sprinkler Sys
- 16. Greenhouse
- 17. Decorative Lighting
- 18. Tennis Court
- 19. Satellite Dish
- 20. Accessible
- 21. Zero Step Entry
- 22. Other
- 23. None

FEATURES (CHECK ALL THAT APPLY IN THIS SECTION)

FEN. Fence

- | | |
|--|-----------------------------------|
| <input type="checkbox"/> 1. Chain Link | <input type="checkbox"/> 6. Iron |
| <input type="checkbox"/> 2. Wood | <input type="checkbox"/> 7. Other |
| <input type="checkbox"/> 3. Full | <input type="checkbox"/> 8. None |
| <input type="checkbox"/> 4. Partial | |
| <input type="checkbox"/> 5. Privacy | |

LOT. Lot Description

- | | |
|---|--|
| <input type="checkbox"/> 1. In City | <input type="checkbox"/> 13. Rolling |
| <input type="checkbox"/> 2. Corner Lot | <input type="checkbox"/> 14. Sloping |
| <input type="checkbox"/> 3. Riverfront | <input type="checkbox"/> 15. Pond/Stream on Prop |
| <input type="checkbox"/> 4. Lakefront | <input type="checkbox"/> 16. Wooded |
| <input type="checkbox"/> 5. Cul-De-Sac | <input type="checkbox"/> 17. Other |
| <input type="checkbox"/> 6. Golf Course Frntg | |
| <input type="checkbox"/> 7. In Subdivision | |
| <input type="checkbox"/> 8. Public Sidewalk | |
| <input type="checkbox"/> 9. Alley | |
| <input type="checkbox"/> 10. Curb and Gutter | |
| <input type="checkbox"/> 11. Curb Cut | |
| <input type="checkbox"/> 12. Level | |

HTF. Heating Fuel

- | | |
|--------------------------------------|--|
| <input type="checkbox"/> 1. Gas | <input type="checkbox"/> 6. Water Source |
| <input type="checkbox"/> 2. Electric | <input type="checkbox"/> 7. Wood |
| <input type="checkbox"/> 3. Oil | <input type="checkbox"/> 8. Other |
| <input type="checkbox"/> 4. Propane | <input type="checkbox"/> 9. None |
| <input type="checkbox"/> 5. Solar | |

HTT. Heating Type

- | | |
|---|---------------------------------------|
| <input type="checkbox"/> 1. Forced Air | <input type="checkbox"/> 8. Hot Water |
| <input type="checkbox"/> 2. Heat Pump | <input type="checkbox"/> 9. Steam |
| <input type="checkbox"/> 3. Gravity | <input type="checkbox"/> 10. Zoned |
| <input type="checkbox"/> 4. Baseboard | <input type="checkbox"/> 11. Other |
| <input type="checkbox"/> 5. Radiant | <input type="checkbox"/> 12. None |
| <input type="checkbox"/> 6. Wall | |
| <input type="checkbox"/> 7. Wood Assist | |

J. Master Bath Type

- | | |
|------------------------------------|--|
| <input type="checkbox"/> 1. Full | <input type="checkbox"/> 5. Whirlpool |
| <input type="checkbox"/> 2. 3/4 | <input type="checkbox"/> 6. Double Sinks |
| <input type="checkbox"/> 3. 1/2 | <input type="checkbox"/> 7. Bidet |
| <input type="checkbox"/> 4. Shower | <input type="checkbox"/> 8. None |

INT. Interior Features

- | | |
|---|--|
| <input type="checkbox"/> 1. Central Vac | <input type="checkbox"/> 18. Whirlpool |
| <input type="checkbox"/> 2. Security System | <input type="checkbox"/> 19. Zero Step Entry |
| <input type="checkbox"/> 3. Cable Avail | <input type="checkbox"/> 20. Other |
| <input type="checkbox"/> 4. Wetbar | <input type="checkbox"/> 21. None |
| <input type="checkbox"/> 5. Intercom | |
| <input type="checkbox"/> 6. Walk-Up Attic | |
| <input type="checkbox"/> 7. Attic Exh Fan | |
| <input type="checkbox"/> 8. Whole House Exh | |
| <input type="checkbox"/> 9. 9'+ Ceiling | |
| <input type="checkbox"/> 10. Fire Sprinkler | |
| <input type="checkbox"/> 11. Power Humidifier | |
| <input type="checkbox"/> 12. Elect. Air Filters | |
| <input type="checkbox"/> 13. Accessible | |
| <input type="checkbox"/> 14. Exercise Room | |
| <input type="checkbox"/> 15. Two Story Entry | |
| <input type="checkbox"/> 16. LL Daylgt Wndw | |
| <input type="checkbox"/> 17. Elevator | |

K. Sewer And Water

- | | |
|---|---|
| <input type="checkbox"/> 1. Public Water | <input type="checkbox"/> 6. Private Sewer |
| <input type="checkbox"/> 2. Private Water | <input type="checkbox"/> 7. Septic |
| <input type="checkbox"/> 3. Rural Water | <input type="checkbox"/> 8. Other |
| <input type="checkbox"/> 4. Well | <input type="checkbox"/> 9. None |
| <input type="checkbox"/> 5. Public Sewer | |

***M. Landlord Pays**

- | | |
|--------------------------------------|-----------------------------------|
| <input type="checkbox"/> 1. Gas | <input type="checkbox"/> 5. Sewer |
| <input type="checkbox"/> 2. Electric | <input type="checkbox"/> 6. Cable |
| <input type="checkbox"/> 3. Water | <input type="checkbox"/> 7. Other |
| <input type="checkbox"/> 4. Trash | <input type="checkbox"/> 8. None |

MBT. Master Bath Type

- | | |
|------------------------------------|--|
| <input type="checkbox"/> 1. Full | <input type="checkbox"/> 5. Whirlpool |
| <input type="checkbox"/> 2. 3/4 | <input type="checkbox"/> 6. Double Sinks |
| <input type="checkbox"/> 3. 1/2 | <input type="checkbox"/> 7. Bidet |
| <input type="checkbox"/> 4. Shower | <input type="checkbox"/> 8. None |