Consolidated Multiple Listing Service, Inc.

Residential - Input Sheet

Please print clearly. Do not use $ signs or commas for dollar entries.

RES

List Office ID | **Area** | **List Price** $

TMS# / Parcel ID

Property Type
Cluster, Single Family, Condo, Farm, Manufactured, Mobile, Modular, Patio, Townhouse, Fractional Ownership (Select 1)

County Lexington, Richland, Kershaw, Abbeville, Aiken, Calhoun, Fairfield, Newberry, Orangeburg, Saluda, Sumter, Other (Select 1)

Address | **Street No** | Street Dir | **Street Name** | Street Type, Ex. Road, Drive, Etc. | Unit # / Lot #

Subdivision

City | **Zip Code** –

Lot Size | Acres .

Fraction Owned
N/A 1/2 1/3 1/4 1/5 1/6 1/12 Other

Agent Public ID | **Agent** | Agent Phone –

Co-Agent Public ID | Co-Agent | Co-Agent Phone –

List Agt Oth Phone - B# ( )– | List Agt Oth Phone - M# ( )–

Fax # ( )– | Agent E-mail

List Office Name | List Office Phone ( )– | Ext

List Office Fax ( )– | **Comp SB** | **VC** Y / N | **Listing Agreement Type** (circle one) Exclusive Right to Sell Exclusive Agency

Owner Name | Owner Phone ( )

List Date / / | **Exp. Date** / / | **Foreclosed Property** Y / N (circle one)

In Flood Plain None/Partial/Full (circle one) | **Property Disclosure** Y / N (circle one) | Exempt from Property Disclosure Y / N (circle one) | **Rollback Tax** Y / N / Unk (circle one) | **Withhold from Internet** Y / N (circle one)

# of Bedrooms | **# of Stories** . | **Age** (circle one) 1-5 6-12 13-20 21-30 31-50 51-99 Century + New | **# of Fireplaces**

Heated Square Feet | +/- 10% | Pool Y / N (circle one) | **Garage Spaces** | **Garage** Gar Att-Side Entry Gar Att. Gar Det. Park Gar Cpt Att. Cpt Det. None | Parking Spaces | Garage Level Lower / Main (circle one)

Full Baths: Bsmt | **Main** | 2nd | 3rd | 4th | Frog

Half Baths: Bsmt | **Main** | 2nd | 3rd | 4th | Frog

Room Level Choices: **M**ain **S**econd **T**hird **F**ourth **B**asement

Dining Room | Living Room | Family Room | Great Room

Kitchen | Washer/Dryer | Other Room | Master Bedroom

Bedroom 2 | Bedroom 3 | Bedroom 4 | Bedroom 5

School District: (circle one)

Lex 1, Lex 2, Lex 3, Lex 4, Lex/Rich 5, Rich 1, Rich 2, Other, Fairfield Cnty, Kershaw Cnty, Newberry Cnty, Saluda Cnty

Elem School

Middle School

High School

Primary School

Intermed School

Elem School Choice: Y / N (circle one) | Mid School Choice: Y / N (circle one) | Int School Choice: Y / N (circle one) | High School Choice: Y / N (circle one)

Water Frontage 0 - 9999 | Assn Fee $ | Assn/Regime Fee Per MO or YR or QTR (circle one)

HOA Contact Name: | HOA Contact #:

Tenant / Contact: | Tenant / Contact #:

PUBLIC REMARKS Additional remarks attach separate page. (750 char max)

AGENT REMARKS (NON-PUBLIC) Attach separate page if necessary. (300 char max)

DIRECTIONS Attach separate page if necessary. (200 char max)

Above Information Furnished & Verified by Property Owner _____ **Date** _____
Property Owner Signature

Rev. 06/09

Entered by: _____

All Information Subject To Errors & Omissions And is Not Guaranteed

ML#