

# HICENTRAL MLS, LTD.

## PROPERTY TYPE—COMMERCIAL INDUSTRIAL

**KEYWORDS:** Fill in the boxes for each keyword. (\*) items denote required entries for adding a listing. (RC)s denote conditionally required entries for adding a listing.

### MLS INFORMATION

\*TMK #: \_\_\_\_\_ \*Listing Agent MLSID: \_\_\_\_\_ \*MLS #: \_\_\_\_\_  
 Div/Zone/Sec/Plat/Parcel/CPR Co-Listing Agent MLSID: \_\_\_\_\_ \*List Price: \_\_\_\_\_

### GENERAL LISTING INFORMATION

\*Land Recorded: \_\_\_\_\_ \*Listing Type (ER/EA): \_\_\_\_\_ \*Listing Date: \_\_\_\_\_ \*Listing Exp Date: \_\_\_\_\_  
 \*Compensation: \_\_\_\_\_ Comp. Subject To: \_\_\_\_\_ \*Dual Variable Comp: \_\_\_\_\_ Comp. Method: \_\_\_\_\_  
 Foreclosure: \_\_\_\_\_ Advertise Date: \_\_\_\_\_ Auction Date: \_\_\_\_\_ \*G.E. Tax Paid by Seller: \_\_\_\_\_  
 \*Show Internet: \_\_\_\_\_ (RC)Show Addr Internet: \_\_\_\_\_ \*Lockbox: \_\_\_\_\_ Foreclosure No: \_\_\_\_\_  
 Commercial Space Lease: \_\_\_\_\_ Days Open: \_\_\_\_\_ \*Lockbox Serial #: \_\_\_\_\_ \*Listing Service: \_\_\_\_\_

### ADDRESS

\*Street #: \_\_\_\_\_ Street Dir Prefix: \_\_\_\_\_ \*Street Name: \_\_\_\_\_ \*Street Suffix: \_\_\_\_\_  
 \*City: \_\_\_\_\_ \*Zip Code: \_\_\_\_\_ \*State: \_\_\_\_\_ Unit Number: \_\_\_\_\_

### SCHOOLS

Elementary School: \_\_\_\_\_ Middle School: \_\_\_\_\_ High School: \_\_\_\_\_

### PROPERTY INFORMATION

SIC: \_\_\_\_\_  
 \*Zoning: \_\_\_\_\_ \*Flood Zone Code: \_\_\_\_\_ Total # of Units: \_\_\_\_\_  
 # of Stories: \_\_\_\_\_ Parking Total: \_\_\_\_\_ \*Year Built: \_\_\_\_\_  
 Floor #: \_\_\_\_\_ \*SQFT Other: \_\_\_\_\_ \*SQFT Interior: \_\_\_\_\_  
 \*Land SQFT: \_\_\_\_\_ Business Name: \_\_\_\_\_ \*Landlord: \_\_\_\_\_  
 Public Report #: \_\_\_\_\_ \*Building Name: \_\_\_\_\_ Year Established: \_\_\_\_\_ \*Landlord Ph #: \_\_\_\_\_  
 Mgmt. Company: \_\_\_\_\_ Mgmt. Co. Phone #: \_\_\_\_\_

### FINANCIAL INFORMATION

Rental Income Monthly: \_\_\_\_\_  
 Gross Income: \_\_\_\_\_ Annual Expense: \_\_\_\_\_  
 Net Operating Income: \_\_\_\_\_  
 \*Tax Assessed Land: \_\_\_\_\_ \*Tax Assessed Improvements: \_\_\_\_\_ \*Tax Assessed Total: \_\_\_\_\_  
 \*Tax Amount Monthly: \_\_\_\_\_ \*Assessment Year (YYYY): \_\_\_\_\_

### LEASEHOLD INFORMATION

\*Land Tenure (FS/LH): \_\_\_\_\_ Fee Purchase: \_\_\_\_\_ (RC)Fee Options: \_\_\_\_\_  
 \*Lease Type: \_\_\_\_\_ (RC)Lessor: \_\_\_\_\_  
 Cur Mon Lease/Rnt: \_\_\_\_\_ Lease Renegotiate Date: \_\_\_\_\_ (RC)Lease Exp. Date: \_\_\_\_\_ (RC)Lease Until Year: \_\_\_\_\_  
 Nxt Step-Up Mon Rnt: \_\_\_\_\_ 2nd Step-Up Mo Rnt: \_\_\_\_\_ Next Until Year: \_\_\_\_\_ 2nd Until Year: \_\_\_\_\_

### REMARKS

Public Remarks (maximum 800 alpha/numeric characters)

Agent/Showing Remarks (maximum 400 alpha/numeric characters)

# COMMERCIAL INDUSTRIAL FEATURES

(R) = REQUIRED (gray box)

<b>1. (R) SPECIAL SALE CONDITIONS</b> <input type="checkbox"/> None <input type="checkbox"/> Bankruptcy <input type="checkbox"/> Foreclosure <input type="checkbox"/> Probate <input type="checkbox"/> Short Sale <input type="checkbox"/> Probate <input type="checkbox"/> Short Sale	<b>2. (R) FINANCING TERMS ACCEPTABLE</b> <input type="checkbox"/> 1031 Exchange <input type="checkbox"/> Agreement of Sale <input type="checkbox"/> Assumable Loan <input type="checkbox"/> Cash <input type="checkbox"/> Govt Granted Loan <input type="checkbox"/> Lease w/ Pcse Opt <input type="checkbox"/> Lease Option <input type="checkbox"/> Open <input type="checkbox"/> Other <input type="checkbox"/> Purchase Money Mortgage <input type="checkbox"/> Wrap	<b>3. (R) DISCLOSURES</b> <input type="checkbox"/> None <input type="checkbox"/> Buyer Restrictions <input type="checkbox"/> Call Listor <input type="checkbox"/> Court Approval Required <input type="checkbox"/> Improvement District <input type="checkbox"/> Inactive Lic Owner <input type="checkbox"/> Lender Approval Req. <input type="checkbox"/> Licensed Owner <input type="checkbox"/> Listor Owner <input type="checkbox"/> Moratorium <input type="checkbox"/> Non Res Owner <input type="checkbox"/> Pending Litigation <input type="checkbox"/> Photovoltaic <input type="checkbox"/> Property Disc Statement <input type="checkbox"/> Relative of Licensee <input type="checkbox"/> See Remarks <input type="checkbox"/> Special Assessment	<b>4. PROPERTY TYPE</b> <input type="checkbox"/> Community Center <input type="checkbox"/> Condo/Apt <input type="checkbox"/> Convenience Store <input type="checkbox"/> Free Standing <input type="checkbox"/> Hotel/Motel <input type="checkbox"/> Industrial <input type="checkbox"/> Mixed Use <input type="checkbox"/> Neighborhood Center <input type="checkbox"/> Office <input type="checkbox"/> Other <input type="checkbox"/> Regional Center <input type="checkbox"/> Restaurant <input type="checkbox"/> Retail Mall <input type="checkbox"/> See Remarks <input type="checkbox"/> Shopping Center <input type="checkbox"/> Special Purpose <input type="checkbox"/> Warehouse	<b>5. STORY TYPE</b> <input type="checkbox"/> One <input type="checkbox"/> Two <input type="checkbox"/> Three <input type="checkbox"/> 4-7 <input type="checkbox"/> 8-14 <input type="checkbox"/> 15-20 <input type="checkbox"/> 21+
<b>6. PROPERTY CONDITION</b> <input type="checkbox"/> Excellent <input type="checkbox"/> Above Average <input type="checkbox"/> Average <input type="checkbox"/> Fair <input type="checkbox"/> Needs Major Repair <input type="checkbox"/> Tear Down	<b>7. DOCUMENTS AVAILABLE</b> <input type="checkbox"/> None <input type="checkbox"/> Building Plans <input type="checkbox"/> Environmental Assessment <input type="checkbox"/> Inventory <input type="checkbox"/> Lease Documents <input type="checkbox"/> Licenses <input type="checkbox"/> Other <input type="checkbox"/> P&L <input type="checkbox"/> Permits <input type="checkbox"/> Survey <input type="checkbox"/> Tax Return <input type="checkbox"/> Title Search	<b>8. (R) AMENITIES</b> <input type="checkbox"/> None <input type="checkbox"/> ADA Accessible <input type="checkbox"/> ADA Compliant <input type="checkbox"/> Chill Room <input type="checkbox"/> Computer Room <input type="checkbox"/> Fire Sprinkler <input type="checkbox"/> Floor Drain <input type="checkbox"/> Freezer Room <input type="checkbox"/> Mezzanine Office <input type="checkbox"/> Office <input type="checkbox"/> Other <input type="checkbox"/> Private Restroom <input type="checkbox"/> Public Restroom <input type="checkbox"/> Raised Floor <input type="checkbox"/> Recreation Area <input type="checkbox"/> Security	<b>9. (R) CONSTRUCTION/EXTERIOR FINISH</b> <input type="checkbox"/> Brick <input type="checkbox"/> Concrete Block <input type="checkbox"/> Concrete Tilt-up <input type="checkbox"/> Converted <input type="checkbox"/> Food Quality <input type="checkbox"/> High Cube <input type="checkbox"/> Loft Space <input type="checkbox"/> Metal Frame <input type="checkbox"/> New <input type="checkbox"/> Other <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Remodeled <input type="checkbox"/> See Remarks <input type="checkbox"/> Stone <input type="checkbox"/> Under Construction <input type="checkbox"/> Vinyl <input type="checkbox"/> Wood Frame	<b>10. (R) ROOFING</b> <input type="checkbox"/> Aluminum/Steel <input type="checkbox"/> Composition <input type="checkbox"/> Other <input type="checkbox"/> Pitch & Gravel <input type="checkbox"/> Shake <input type="checkbox"/> Shingle <input type="checkbox"/> Tile
<b>11. (R) FLOOR COVERING</b> <input type="checkbox"/> Asphalt <input type="checkbox"/> Concrete <input type="checkbox"/> Dock High <input type="checkbox"/> Heavy Load <input type="checkbox"/> Light Load <input type="checkbox"/> Other <input type="checkbox"/> See Remarks <input type="checkbox"/> Wood	<b>12. (R) PARKING</b> <input type="checkbox"/> None <input type="checkbox"/> Assigned <input type="checkbox"/> Off Site <input type="checkbox"/> On Site <input type="checkbox"/> Other <input type="checkbox"/> Pay Public <input type="checkbox"/> Street <input type="checkbox"/> Unassigned	<b>13. PROPERTY FRONTAGE</b> <input type="checkbox"/> Building Lobby <input type="checkbox"/> Industrial <input type="checkbox"/> Interior Hallway <input type="checkbox"/> Main Street <input type="checkbox"/> Other <input type="checkbox"/> Retail Mall <input type="checkbox"/> Side Street	<b>14. (R) LOADING</b> <input type="checkbox"/> None <input type="checkbox"/> Container Dock <input type="checkbox"/> Container Doors <input type="checkbox"/> Freight Elevator <input type="checkbox"/> Loading Area <input type="checkbox"/> Other <input type="checkbox"/> Passenger Elevator	<b>15. (R) EASEMENTS</b> <input type="checkbox"/> None <input type="checkbox"/> Draining <input type="checkbox"/> Driveway <input type="checkbox"/> Other <input type="checkbox"/> Sewer <input type="checkbox"/> Utility <input type="checkbox"/> Water
<b>16. (R) INCOME INFO SOURCE</b> <input type="checkbox"/> Accountant <input type="checkbox"/> Appraisal <input type="checkbox"/> Broker <input type="checkbox"/> Excise Tax <input type="checkbox"/> Other <input type="checkbox"/> Owner <input type="checkbox"/> Tax Return	<b>17. (R) EXPENSE INFO SOURCE</b> <input type="checkbox"/> Accountant <input type="checkbox"/> Appraisal <input type="checkbox"/> Broker <input type="checkbox"/> Industry Average <input type="checkbox"/> Owner <input type="checkbox"/> Tax Return	<b>18. (R) UTILITIES AVAILABLE</b> <input type="checkbox"/> None <input type="checkbox"/> Emergency <input type="checkbox"/> Gas <input type="checkbox"/> Heavy Electric <input type="checkbox"/> Large Water Meter <input type="checkbox"/> Light Electricity <input type="checkbox"/> Other <input type="checkbox"/> Small Water Meter	<b>19. TENANTS RESPONSIBILITIES INCL.</b> <input type="checkbox"/> None <input type="checkbox"/> AC Maintenance <input type="checkbox"/> Common Area Maintenance <input type="checkbox"/> Electricity <input type="checkbox"/> Elevator Maintenance <input type="checkbox"/> Excise Tax <input type="checkbox"/> Fire Insurance <input type="checkbox"/> Gas <input type="checkbox"/> Glass Insurance <input type="checkbox"/> Janitorial/Trash Removal <input type="checkbox"/> Lease Rent <input type="checkbox"/> Liability Insurance <input type="checkbox"/> Other <input type="checkbox"/> Real Estate Taxes <input type="checkbox"/> Water	<b>20. (R) SEWER</b> <input type="checkbox"/> None <input type="checkbox"/> Cesspool <input type="checkbox"/> Connected <input type="checkbox"/> Holding Tank <input type="checkbox"/> Not Connected <input type="checkbox"/> Other <input type="checkbox"/> Septic
<b>21. (R) COOLING</b> <input type="checkbox"/> None <input type="checkbox"/> Central AC <input type="checkbox"/> Individual <input type="checkbox"/> Individual Meters <input type="checkbox"/> Other	<b>22. SHOWING</b> <input type="checkbox"/> Appointment Only <input type="checkbox"/> Call Listor <input type="checkbox"/> Sentikey - Go/Show <input type="checkbox"/> DND Tenant/Employees			

I state to the best of my knowledge that the above information is correct and authorize its release.

Broker's Initials: \_\_\_\_\_

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SELLER SIGNATURE

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SELLER SIGNATURE

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
DATE

DR/BIC certifies that a valid Exclusive Listing Agreement is being held at listing office.

\_\_\_\_\_  
AUTHORIZED SIGNATURE OF DR/BIC

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
DATE