

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: _____
 Foreclosure: _____ Advertise Date: _____ Auction Date: _____ Foreclosure No: _____
 *Show Internet: _____ (RC)Show Addr Internet: _____ *Lockbox: _____ *Listing Service: _____
 Commercial Space Lease: _____ Days Open: _____ *Lockbox Serial #: _____

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 1200 alpha/numeric characters) **Note: Offering of compensation is not allowed in the MLS**

Agent/Showing Remarks (maximum 600 alpha/numeric characters) **Note: Offering of compensation is not allowed in the MLS**

COMMERCIAL INDUSTRIAL FEATURES

(R) = REQUIRED (gray box)

1. (R) SPECIAL SALE CONDITIONS <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	2. (R) FINANCING TERMS ACCEPTABLE <input type="checkbox"/> 1031 Exchange <input type="checkbox"/> Agreement of Sale <input type="checkbox"/> Assumable Loan <input type="checkbox"/> Cash <input type="checkbox"/> Govt Guaranteed 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	3. (R) DISCLOSURES <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	4. PROPERTY TYPE <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	5. STORY TYPE <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+
6. PROPERTY CONDITION <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	7. DOCUMENTS AVAILABLE <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	8. (R) AMENITIES <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	9. (R) CONSTRUCTION/EXTERIOR FINISH <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	10. (R) ROOFING <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
11. (R) FLOOR COVERING <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	12. (R) PARKING <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	13. PROPERTY FRONTAGE <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	14. (R) LOADING <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	15. (R) EASEMENTS <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
16. (R) INCOME INFO SOURCE <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	17. (R) EXPENSE INFO SOURCE <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	18. (R) UTILITIES AVAILABLE <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	19. TENANTS RESPONSIBILITIES INCL. <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	20. (R) SEWER <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
21. (R) COOLING <input type="checkbox"/> None <input type="checkbox"/> Central AC <input type="checkbox"/> Individual <input type="checkbox"/> Individual Meters <input type="checkbox"/> Other	22. SHOWING <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