

List #:

\* Prop ID#:

Prop. Type: **Commercial For Lease**

\* = Required Field

### COMMERCIAL FOR LEASE - DATA INPUT

<b>* Sub Property Type</b> (Select 1):	<b>Property ID No.:</b>
<input type="checkbox"/> Industrial Space For Lease <input type="checkbox"/> Office Space For Lease <input type="checkbox"/> Retail Space For Lease <input type="checkbox"/> Other	

#### Contract Information

<b>* Listing Date:</b>	<b>* Expiration Date:</b>	<b>* List Price (\$):</b>
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<b>* Type of Listing Service</b> (Select 1):		
<input type="checkbox"/> Full Service Listing	<input type="checkbox"/> Limited Service Listing	<input type="checkbox"/> MLS Entry Only Listing

<b>* Type of Listing Contract</b> (Select 1):	
<input type="checkbox"/> Exc. Right to Sell or Lease	<input type="checkbox"/> Exc. Agency to Sell or Lease
<input type="checkbox"/> Exc. Right to Sell with Reserved Prospect	<input type="checkbox"/> Exc. Agency with Reserved Prospect
<input type="checkbox"/> Exc. Right to Sell with Variable Rate Compensation	<input type="checkbox"/> Exc. Agency with Variable Rate Compensation

<b>Items To Be Excluded From Listing:</b>
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#### Commission/Compensation Information

<b>* Buyer's Agent Compensation Type</b> (Select 1):		
<input type="checkbox"/> Dollar Amount	<input type="checkbox"/> Percentage of a Month's Rent	<input type="checkbox"/> Percentage of a Month's Rent for each year of the Lease
<input type="checkbox"/> Percentage of the gross Lease Value for the lease's first year		
<input type="checkbox"/> Percentage of the gross Lease Value for the lease's entire term		

<b>* Buyer's Agent Compensation Amount</b> (Enter as either \$ or %):
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<b>Renewal Compensation:</b>
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<b>Compensation Notes</b> (Max 2):	
<input type="checkbox"/> Call Listing Broker For Additional Commission Information	<input type="checkbox"/> Call Listing Broker For Bonus Information

#### Listing Agent & Office Information

<b>* List Agent:</b>	<b>Office:</b>
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<b>Co-List Agent:</b>	<b>Office:</b>
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#### Listing Address Information

<u>Street #</u>	<u>Pre Dir.</u>	<b>* <u>Street Name</u></b>	<u>Street Type</u>	<u>Post Dir.</u>	<u>Unit #</u>
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<b>* State:</b>	<b>* County:</b>
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<b>* Town:</b>	<b>* Zip Code: -</b>
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<b>* Neighborhood:</b>
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<b>Complex Name:</b>
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<b>Model:</b>
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**Commercial Information****Current Use:****Business Included (Y/N):****Commercial Features (16 Max):**

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> Dock Height Loading | <input type="checkbox"/> Elevator               | <input type="checkbox"/> Employee Lounge    | <input type="checkbox"/> Fire Sprinkler System |
| <input type="checkbox"/> Freight Elevator    | <input type="checkbox"/> Grade Loading          | <input type="checkbox"/> Handicap Design    | <input type="checkbox"/> Hoists                |
| <input type="checkbox"/> Intercom            | <input type="checkbox"/> Living Space Available | <input type="checkbox"/> Public Restrooms   | <input type="checkbox"/> Rail Height Loading   |
| <input type="checkbox"/> Security Alarm      | <input type="checkbox"/> Smoke Alarm            | <input type="checkbox"/> Waterfront Loading | <input type="checkbox"/> Window Display        |

**Lease/Rental Information****Lease Type:****Lease Description:****\* Security Deposit:****Sublettable (Y/N):****Space is Also For Sale (Y/N):****\* Lease Terms (14 Max):**

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> One Year               | <input type="checkbox"/> Two Years                | <input type="checkbox"/> Three Years   | <input type="checkbox"/> Four Years    |
| <input type="checkbox"/> Five Years             | <input type="checkbox"/> Ten Years                | <input type="checkbox"/> Summer Rental | <input type="checkbox"/> Winter Rental |
| <input type="checkbox"/> Month to Month         | <input type="checkbox"/> Annual Increase          | <input type="checkbox"/> Net/Net/Net   | <input type="checkbox"/> Vacate Clause |
| <input type="checkbox"/> First Right of Refusal | <input type="checkbox"/> Lease Purchase Available |  |  |

**\* Tenant Pays For (13 Max):**

- |   |                                       |                                     |   |
|---|---------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Air Conditioning | <input type="checkbox"/> Electric     | <input type="checkbox"/> Escalator  | <input type="checkbox"/> Expenses Over Base |
| <input type="checkbox"/> Heat             | <input type="checkbox"/> Insurance    | <input type="checkbox"/> Janitorial | <input type="checkbox"/> Parking            |
| <input type="checkbox"/> Sewer            | <input type="checkbox"/> Snow Removal | <input type="checkbox"/> Taxes      | <input type="checkbox"/> Taxes Over Base    |
| <input type="checkbox"/> Trash Service    | <input type="checkbox"/> Water        | <input type="checkbox"/> None       |   |

**Owner Pays For (10Max):**

- |  |                                   |   |  |                               |
|--|-----------------------------------|---|--|-------------------------------|
| <input type="checkbox"/> All Utilities | <input type="checkbox"/> Electric | <input type="checkbox"/> Fire Insurance | <input type="checkbox"/> Garbage/Trash | <input type="checkbox"/> Gas  |
| <input type="checkbox"/> Maintenance   | <input type="checkbox"/> Sewer    | <input type="checkbox"/> Taxes          | <input type="checkbox"/> Water         | <input type="checkbox"/> None |

**Build Out Allowance (\$):**

**Structural Information & Exterior Features**

\* Year Built:

Total Square Feet:

Percent Leased:

Area is Divisible (Y/N):

Additional Space Available (Y/N):

Square Foot Source (Select 1):

 Appraiser
  Approximate
  Measured
  Owner
  Public Records
**Square Foot Allocations**

Industrial Sq. Ft.:

Office Sq. Ft.:

Residential Sq. Ft.:

Retail Sq. Ft.:

Warehouse Sq. Ft.:

Color:

\* Construction (3 Max):

 Block
  Brick
  Concrete
  Frame
  Log
  Metal
  Stone
  Other

\* Foundation (2 Max):

 Block
  Brick
  Concrete
  Masonry
  Piling
  Slab
  Stone
  Wood
  None

Ceiling Height:

\* Roof (2 Max):

 Asphalt Shingle
  Built Up
  Composition
  Concrete
  Fiberglass Shingle
  Metal
  Rubber
  Shake
  Slate
  Tar/Gravel
  Tile
  Wood Shingle
  Other
  Not Applicable

Maximum Floor Load:

Flooring (9 Max):

 Ceramic Tile
  Concrete
  Parquet
  Plywood
  Slate
  Tile
  Vinyl
  Wall to Wall Carpet
  Wood

Exterior Features (20 Max):

 Door Sign
  10' - 15' Doors
  16' - 20' Doors
  20'+ Doors
  Under 10' Doors
  Dumpster
  Fully Fenced
  Guttering
  Incinerator
  Lawn Sprinkler
  Levelers
  Loading Dock/Grade
  Loading Dock/Well
  Outside Storage Area
  Partially Fenced
  Pole Sign
  Roof Sign
  Storage Building
  Storm Cellar
  Underground Sprinkler

**Covered Parking Spaces:**

**Uncovered Parking Spaces:**

**\* Garages/Parking (3 Max):**

<input type="checkbox"/> Attached	<input type="checkbox"/> Carport	<input type="checkbox"/> Detached	<input type="checkbox"/> Driveway	<input type="checkbox"/> Lot
<input type="checkbox"/> Off Street	<input type="checkbox"/> Parking Garage	<input type="checkbox"/> Paved	<input type="checkbox"/> Reserved	<input type="checkbox"/> RV/Boat Pad
<input type="checkbox"/> Security	<input type="checkbox"/> Street	<input type="checkbox"/> Under	<input type="checkbox"/> Unit Garage	<input type="checkbox"/> Unpaved
<input type="checkbox"/> None				

**Number of Elevators:**

**Number of Loading Docks:**

**Number of Overhead Doors:**

**Number of Restrooms:**

**Number of Stories:**

**Number of Tenants:**

**Number of Units:**

**Unit Descriptions (10 Max)**

<u>Unit Type</u>	<u># of Units</u>	<u># of Full Baths</u>	<u># of 1/2 Baths</u>	<u>Sq Ft Per Unit</u>	<u>Leased (Y/N)</u>	<u>Avg Monthly Rent (\$)</u>	<u># Vacant Units</u>	<u>Appliances (Max 12 per unit)</u>

**"Unit Type" Selections:** Owner - 1 Bedroom - 2 Bedroom - 3 Bedroom - 4 Bedroom - Industrial - Office - Retail - Studio

**"Appliance" Selections:** Cook Top - Dishwasher - Disposal - Dryer - Freezer - Grill - Icemaker - Microwave - Range - Refrigerator - Wall Oven - Washer - None

**Lot and Location Information**

**Acres:**

**Lot Square Feet:**

**\* Zoning:**

**Traffic Count:**

**\* Location (11 Max):**

<input type="checkbox"/> Downtown	<input type="checkbox"/> Highway Access	<input type="checkbox"/> Historic Area	<input type="checkbox"/> Industrial Park	<input type="checkbox"/> Office Park
<input type="checkbox"/> Park	<input type="checkbox"/> Rural	<input type="checkbox"/> Shopping Mall	<input type="checkbox"/> Strip Mall	<input type="checkbox"/> Suburban
<input type="checkbox"/> Urban				

**Frontage Feet:**

**\* Road Fronts On (10 Max):**

<input type="checkbox"/> City Street	<input type="checkbox"/> Cul-De-Sac	<input type="checkbox"/> Interchange	<input type="checkbox"/> Interstate Highway	<input type="checkbox"/> Paved Road
<input type="checkbox"/> Private Road	<input type="checkbox"/> State Road	<input type="checkbox"/> U.S. Highway	<input type="checkbox"/> Unimproved Road	<input type="checkbox"/> Unpaved Road

**Lot Description (6 Max):**

<input type="checkbox"/> Additional Land Avail.	<input type="checkbox"/> Corner	<input type="checkbox"/> Cul De Sac	<input type="checkbox"/> Easements	<input type="checkbox"/> Farm
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Golf Course Frontage	<input type="checkbox"/> Horse Property	<input type="checkbox"/> Level	<input type="checkbox"/> Sloping
<input type="checkbox"/> Some Wetlands	<input type="checkbox"/> Views	<input type="checkbox"/> Water Frontage	<input type="checkbox"/> Wooded	<input type="checkbox"/> Zero Lot Line

**\* Available Documents (15 Max):**

<input type="checkbox"/> Aerial Survey	<input type="checkbox"/> Appraisal	<input type="checkbox"/> Brochure	<input type="checkbox"/> Drawings
<input type="checkbox"/> Env. Impact Study	<input type="checkbox"/> Land Survey	<input type="checkbox"/> Lead Disclosure	<input type="checkbox"/> Legal Description
<input type="checkbox"/> Percolation Test	<input type="checkbox"/> Plot Plan/Survey	<input type="checkbox"/> Recorded Plat/Plan	<input type="checkbox"/> Soil Survey
<input type="checkbox"/> Subdivision Approval	<input type="checkbox"/> Topographical Survey	<input type="checkbox"/> Zoning Waiver	<input type="checkbox"/> None

**Utility Information****\* Heating (4 Max):**

- |                                    |                                    |                                   |                                    |                                       |
|------------------------------------|------------------------------------|-----------------------------------|------------------------------------|---------------------------------------|
| <input type="checkbox"/> Gas       | <input type="checkbox"/> Oil       | <input type="checkbox"/> Electric | <input type="checkbox"/> Propane   | <input type="checkbox"/> Solar        |
| <input type="checkbox"/> Wood      | <input type="checkbox"/> Heat Pump | <input type="checkbox"/> Hot Air  | <input type="checkbox"/> Hot Water | <input type="checkbox"/> Steam        |
| <input type="checkbox"/> Baseboard | <input type="checkbox"/> Radiant   | <input type="checkbox"/> Radiator | <input type="checkbox"/> Wall Unit | <input type="checkbox"/> Space Heater |
| <input type="checkbox"/> Zoned     | <input type="checkbox"/> None      |                                   |                                    |                                       |

**\* Cooling (4 Max):**

- |                                    |                                      |                                    |                                    |                                      |
|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|
| <input type="checkbox"/> Attic Fan | <input type="checkbox"/> Central Air | <input type="checkbox"/> Heat Pump | <input type="checkbox"/> Wall Unit | <input type="checkbox"/> Window Unit |
| <input type="checkbox"/> Zoned     | <input type="checkbox"/> None        |                                    |                                    |                                      |

**\* Available Utilities (10 Max):**

- |  |  |  |  |                                       |
|--|--|--|--|---------------------------------------|
| <input type="checkbox"/> Cable         | <input type="checkbox"/> Cable Available | <input type="checkbox"/> Electricity     | <input type="checkbox"/> Electricity Available | <input type="checkbox"/> Gas          |
| <input type="checkbox"/> Gas Available | <input type="checkbox"/> Telephone       | <input type="checkbox"/> Phone Available | <input type="checkbox"/> Underground Required  | <input type="checkbox"/> None/Unknown |

**Electrical Service (10 Max):**

- |  |                                    |                                   |   |                                    |
|--|------------------------------------|-----------------------------------|---|------------------------------------|
| <input type="checkbox"/> 60 Amps or Less | <input type="checkbox"/> 100 Amps  | <input type="checkbox"/> 150 Amps | <input type="checkbox"/> 200+ Amps        | <input type="checkbox"/> 110 Volts |
| <input type="checkbox"/> 220 Volts       | <input type="checkbox"/> 440 Volts | <input type="checkbox"/> 3 Phase  | <input type="checkbox"/> Circuit Breakers | <input type="checkbox"/> Fuses     |

**\* Water (2 Max):**

- |                                     |   |                               |                                    |                                |                               |
|-------------------------------------|---|-------------------------------|------------------------------------|--------------------------------|-------------------------------|
| <input type="checkbox"/> City Water | <input type="checkbox"/> Private Water System | <input type="checkbox"/> Well | <input type="checkbox"/> In Street | <input type="checkbox"/> Other | <input type="checkbox"/> None |
|-------------------------------------|---|-------------------------------|------------------------------------|--------------------------------|-------------------------------|

**\* Sewer (3 Max):**

- |                                   |                                 |                                |                                     |                                    |                                |                               |
|-----------------------------------|---------------------------------|--------------------------------|-------------------------------------|------------------------------------|--------------------------------|-------------------------------|
| <input type="checkbox"/> Cesspool | <input type="checkbox"/> Septic | <input type="checkbox"/> Sewer | <input type="checkbox"/> Sewer Fees | <input type="checkbox"/> In Street | <input type="checkbox"/> Other | <input type="checkbox"/> None |
|-----------------------------------|---------------------------------|--------------------------------|-------------------------------------|------------------------------------|--------------------------------|-------------------------------|

Sewer Fee (\$):

Sewer Assessment:

**Association Information**

Property Manager:

Manager's Phone:

Manager's Email:

**Additional Information**

\* Showing Instructions:

*(ShowingTime Instructions will only appear in ShowingTime and will not appear on any Matrix display)*

ShowingTime Instructions:

\* Directions:

\* Lockbox Description *(Select 1):*

- CMLS Electronic   
  Gwch Electronic   
  N. C. Electronic   
  N. H. Electronic   
  Wtbry Electronic  
 Combo Box   
  Call Listing Office   
  None

Lockbox Location:

Occupied By *(Select 1):*

- Owner   
  Tenant

\* Possession / Occupancy:

\* Sign *(Y/N):*\* Internet Display *(Y/N):*\* Internet Address Display *(Y/N):*

\* Owner's Name:

Owner's Phone:

Tenant's Name:

Tenant's Phone:

Related MLS#:

## Remarks

\* **Public Remarks** (750 characters max)

**Agent Only Remarks** (400 characters max)

**Addendum Remarks** (2400 characters max)



**VALID LISTING AGREEMENT STATEMENT**

I, the undersigned Broker or Authorized Agent, represent to the Greater Fairfield County Consolidated Multiple Listing Service, Inc., (GFC CMLS) its members and cooperating agents, that I have a valid and legally enforceable: (1.) "Exclusive Right to Sell" listing agreement \_\_\_\_; or (2.) "Exclusive Agency" listing agreement \_\_\_\_; or (3.) "Exclusive Right to Lease" agreement \_\_\_\_, with the owners of the above entitled property. The information contained in the data information sheet is, to the best of my knowledge and belief, true and accurate.

Date: \_\_\_\_\_

\* Listing Broker or Authorized Agent's Signature: \_\_\_\_\_

**ELECTRONIC LOCKBOX AUTHORIZATION**

As a service to its members, the GFC CMLS maintains an electronic lockbox system to facilitate controlled and monitored access to the interior of listed properties by Participants of the GFC CMLS. The Undersigned Owner(s) do \_\_\_\_; or do not \_\_\_\_, authorize the Broker to use the GFC CMLS electronic lockbox system in connection with marketing the Property. Owner(s) acknowledge the GFC CMLS electronic lockbox system is NOT A SECURITY SYSTEM and agree that they will indemnify and hold harmless the GFC CMLS from all loss, costs and damages that may be suffered by Owner(s) arising from or related to the use of any lockbox on the property, other than the GFC CMLS electronic lockbox system.

\* Seller's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Seller's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**AUTHORIZATION TO USE THE MULTIPLE LISTING SERVICE AND DISCLAIMER**

The Undersigned Owner(s) authorize and instruct(s) the Broker to submit the information contained herein to the GFC CMLS, Inc. for the purpose of offering the property for sale or lease through its participants during the period specified. This information has been furnished by the Seller and/or other sources and is not guaranteed by the Broker. Owner(s) agree that the information herein is true and correct to his/her/their knowledge. It is understood that there is no contractual relationship between the Owner(s) and the GFC CMLS, Inc. Receipt of a copy of this Property Data Form is acknowledged by Owner(s).

Date: \_\_\_\_\_

\* Listing Broker or Authorized Agent's Signature: \_\_\_\_\_

\* Seller's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Seller's Signature: \_\_\_\_\_ Date: \_\_\_\_\_