

NEW LISTING WORKSHEET (Form A)

WORKSHEET SUBMITTAL DATE _____



PROPERTY NAME _____

PROPERTY ADDRESS _____ CITY _____ ZIP _____

LISTING AGENTS _____

Auction Services

LISTING TYPE _____

LISTING INFORMATION

AGREEMENT TYPE _____

LIST PRICE _____

LISTING EXPIRATION _____

LIST DATE _____

COMMISSION RATE _____ VRC? ☐ Y ☐ N

CO-OP COMMISSION _____

POSSESSION _____

DIR NEG W SELLER PERM _____

AUCTION DATE _____

MLS INFO

UC WEBSITE _____

COLS. MLS _____

YES-MLS _____

ATHENS CO. _____

KNOX CO. MLS _____

MLS DOCS REQ.:

RPD or EXEMPTION

LBP

OTHER STRUC. (COLS. ONLY)

MARKETING INFO

LAND.COM

UCHUNTING

AUCTIONZIP

FACEBOOK
BUDGET: \$ _____

EMAIL BLAST

PIP

FLYER/BROCHURE

ADVERTISING LIST TO BOC

OWNER INFORMATION

NAME _____

ADDRESS _____

CITY,STATE, ZIP _____

PHONE _____

EMAIL _____

TAX INFORMATION

COUNTY _____

TAX DISTRICT _____ ANNUAL TAXES: _____

PARCEL # _____

TOWNSHIP _____

SCHOOL DISTRICT _____

CORP LIMIT PER AUDITOR _____

SHOWINGS - CALL CSS AT 614-255-5588? _____ (Y or N)

IF NOT CSS, NAME & PHONE _____

DAYS AND TIME FOR SHOWINGS _____

MAPRIGHT LINK: _____

REQUIRED INFORMATION FOR ALL NEW LISTINGS: (check when completed and in Network File)

LISTING AGREEMENT (signed and dated by all parties)

CONSUMER GUIDE (signed and dated)

RESIDENTIAL PROPERTY DISCLOSURE OR EXEMPTION (if applicable)

LEAD BASED PAINT (if applicable)

PHOTOS (numbered and in order of preference for listing)

PROPERTY INFORMATION (if structure on property, please also fill out page 3)

ACREAGE _____	LOT SIZE _____	MULTIPLE LOTS? _____
LOT SIZE FRONT _____	BUILT PRIOR TO 1978 _____	ZONING _____
SF TAX RECORD _____	SF ATFLS _____	SOURCE _____
LATITUDE _____	LONGITUDE _____	SUBTYPE _____
STYLE _____	YEAR BUILT _____	ASSESSMENTS _____
DRIVEWAY _____	GAR./ELCL. SPACES _____	HOMESTEAD EXEMPTION _____
MINERAL RIGHTS AVAIL. _____	WATER TYPE _____	
SEWER TYPE _____		

HEADLINE COPY

PROPERTY DESCRIPTION

FEATURE 1 _____

FEATURE 2 _____

FEATURE 3 _____

FEATURE 4 _____

FEATURE 5 _____

FEATURE 6 _____

FEATURE 7 _____

FEATURE 8 _____

AGENT TO AGENT REMARKS

UC SPECIALTY GROUPS - use all 5 if possible

1. _____

2. _____

3. _____

4. _____

5. _____

DIRECTIONS TO PROPERTY

Between Streets _____ & _____

**IF COMMERCIAL/INDUSTRIAL PROPERTY
CHECK HERE THAT COMMERCIAL/
INDUSTRIAL WORKSHEET IS ATTACHED.**

PROPERTY NAME _____

Auction Services

LOT CHARACTERISTICS

Cul-de-Sac
 Fenced Pasture
 Golf CRS Lot
 Lakefront
 Pond
 Ravine Lot
 Riverfront
 Sloped Lot
 Split Option Avail.
 Stream on Lot
 Waterview
 Waterfront
 Wooded

ADDL ACCEPTANCE COND

Auction Absolute
 Auction Minimum Bid
 Auction Reserve
 BkOwn/REO-DeedNotRec
 BnkOwnd/REO-DeedRec
 Court Approval
 Estate
 Hud
 Relo/Corp
 Short Sale
 VA
 None Known

OTHER:

Cable/Satellite
 Common Area Only
 Electric
 Ext. Building Maint.
 Gas
 Insurance Irrigation
 Lawn Care
 Recreation Security
 Sewer
 Snow Removal
 Trash
 Water
 Other

Buy Brkr/Tenant Rep _____
 BB/TR Amount _____
 Sub Agency _____
 SA Amount _____
 Gross Op Income _____
 Total Op Income _____
 Net Op Income _____

HOA/COA FEE INCLUDES

HOA/COA Contact Name: _____
 HOA/COA Contact #: _____
 HOA/COA Transfer Fee: _____
 Reserve Contribution: _____

PROPERTY NAME _____

Auction Services

ONLY FILL OUT & PRINT THE FOLLOWING PAGES IF THE LISTING HAS A STRUCTURE ON IT

NOTE: FOR KNOX CO. MLS ONLY PLEASE PROVIDE ROOM DIMENSIONS.

BEDROOM LEVEL

Indicate # On Right

- ☐ Beds UP2 _____
- ☐ Beds UP1 _____
- ☐ Beds Entry Level _____
- ☐ Beds Down1 _____
- ☐ Beds Down2 _____

EATING SPACE LEVEL

Indicate # On Right

- ☐ Eating UP2 _____
- ☐ Eating UP1 _____
- ☐ Eating Entry Level _____
- ☐ Eating Down1 _____
- ☐ Eating Down2 _____

UTILITY SPACE LEVEL

Indicate # On Right

- ☐ Utility UP2 _____
- ☐ Utility UP1 _____
- ☐ Utility Entry Level _____
- ☐ Utility Down1 _____
- ☐ Utility Down2 _____

FULL BATHROOM LEVEL

Indicate # On Right

- ☐ Full Bath UP2 _____
- ☐ Full Bath UP1 _____
- ☐ Full Bath Entry Level _____
- ☐ Full Bath Down1 _____
- ☐ Full Bath Down2 _____

FAMILY ROOM LEVEL

Indicate # On Right

- ☐ Family Rm UP2 _____
- ☐ Family Rm UP1 _____
- ☐ Family Rm Entry Level _____
- ☐ Family Rm Down1 _____
- ☐ Family Rm Down2 _____

DEN LEVEL

Indicate # On Right

- ☐ Den UP2 _____
- ☐ Den UP1 _____
- ☐ Den Entry Level _____
- ☐ Den Down1 _____
- ☐ Den Down2 _____

HALF BATHROOM LEVEL

Indicate # On Right

- ☐ Half Bath UP2 _____
- ☐ Half Bath UP1 _____
- ☐ Half Bath Entry Level _____
- ☐ Half Bath Down1 _____
- ☐ Half Bath Down2 _____

GREAT ROOM LEVEL

Indicate # On Right

- ☐ Grt Rm UP2 _____
- ☐ Grt Rm UP1 _____
- ☐ Grt Rm Entry Level _____
- ☐ Grt Rm Down1 _____
- ☐ Grt Rm Down2 _____

ADDITIONAL STRUCTURES

Indicate # On Right

- ☐ Garage(s) _____
- ☐ Carport(s) _____
- ☐ Attached Garage
- ☐ Detached Garage
- ☐ Heated
- ☐ Opener
- ☐ Shared Driveway
- ☐ Side Load
- ☐ Tandem
- ☐ Common Area
- ☐ Other _____

LIVING ROOM LEVEL

Indicate # On Right

- ☐ Living UP2 _____
- ☐ Living UP1 _____
- ☐ Living Entry Level _____
- ☐ Living Down1 _____
- ☐ Living Down2 _____

REC ROOM LEVEL

Indicate # On Right

- ☐ Rec Rm UP2 _____
- ☐ Rec Rm UP1 _____
- ☐ Rec Rm Entry Level _____
- ☐ Rec Rm Down1 _____
- ☐ Rec Rm Down2 _____

NEW LISTING WORKSHEET (Form A)

PROPERTY NAME _____

PROPERTY INFORMATION - FOR PROPERTIES WITH STRUCTURES ONLY

BASEMENT/FOUNDATION

- | | |
|---|----------------------------------|
| <input type="checkbox"/> Block | <input type="checkbox"/> Partial |
| <input type="checkbox"/> Cellar | <input type="checkbox"/> Poured |
| <input type="checkbox"/> Crawl | <input type="checkbox"/> Slab |
| <input type="checkbox"/> Egress Window(s) | <input type="checkbox"/> Walkout |
| <input type="checkbox"/> Full | <input type="checkbox"/> Walkup |

FIREPLACE

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> One | <input type="checkbox"/> Direct Vent |
| <input type="checkbox"/> Two | <input type="checkbox"/> Gas Log |
| <input type="checkbox"/> Three | <input type="checkbox"/> Log Woodburning |
| <input type="checkbox"/> Four or More | <input type="checkbox"/> Woodburning Stove |
| <input type="checkbox"/> Decorative | |

EXTERIOR

- | | |
|-----------------------------------|--------------------------------------|
| <input type="checkbox"/> Aluminum | <input type="checkbox"/> Steel |
| <input type="checkbox"/> Asbestos | <input type="checkbox"/> Stone |
| <input type="checkbox"/> Block | <input type="checkbox"/> Stucco |
| <input type="checkbox"/> Brick | <input type="checkbox"/> Vinyl |
| <input type="checkbox"/> Log | <input type="checkbox"/> Wood |
| <input type="checkbox"/> Masonry | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Shingle | |

HEATING

- | | |
|-------------------------------------|--|
| <input type="checkbox"/> Baseboard | <input type="checkbox"/> Hot Water |
| <input type="checkbox"/> Electric | <input type="checkbox"/> Oil |
| <input type="checkbox"/> Forced Air | <input type="checkbox"/> Propane |
| <input type="checkbox"/> Gas | <input type="checkbox"/> Radiant |
| <input type="checkbox"/> Geothermal | <input type="checkbox"/> Solar |
| <input type="checkbox"/> Gravity | <input type="checkbox"/> Steam Heat |
| <input type="checkbox"/> Heat Pump | <input type="checkbox"/> Woodburning Furnace |

ROOMS

- | | |
|--|---|
| <input type="checkbox"/> 1st Fl Owner Suite | <input type="checkbox"/> Eat Space/Kitchen |
| <input type="checkbox"/> 1st Fl Laundry | <input type="checkbox"/> Family Rm/Non Bsmt |
| <input type="checkbox"/> 2nd Fl Laundry | <input type="checkbox"/> Florida Room |
| <input type="checkbox"/> LL Laundry | <input type="checkbox"/> Great Room |
| <input type="checkbox"/> Bonus Room | <input type="checkbox"/> Living Room |
| <input type="checkbox"/> Den-Non Bsmt | <input type="checkbox"/> Loft |
| <input type="checkbox"/> Dining Room | <input type="checkbox"/> Rec Room/Bsmt |
| <input type="checkbox"/> Mother-in-law Suite | |

AIR CONDITIONING

- | | |
|----------------------------------|---------------------------------|
| <input type="checkbox"/> Central | <input type="checkbox"/> Window |
| <input type="checkbox"/> Wall | |

WINDOWS

- | | |
|---|-------------------------------------|
| <input type="checkbox"/> Insulated All | <input type="checkbox"/> Storm All |
| <input type="checkbox"/> Insulated Part | <input type="checkbox"/> Storm Part |

EXTERIOR AMENITIES

- | | |
|--|--|
| <input type="checkbox"/> Above Ground Pool | <input type="checkbox"/> Inground Pool |
| <input type="checkbox"/> Additional Bldg | <input type="checkbox"/> Invisible Fence |
| <input type="checkbox"/> Balcony | <input type="checkbox"/> Irrigation System |
| <input type="checkbox"/> Boat Dock | <input type="checkbox"/> Patio |
| <input type="checkbox"/> Deck | <input type="checkbox"/> Screen Porch |
| <input type="checkbox"/> End Unit | <input type="checkbox"/> Storage Shed |
| <input type="checkbox"/> Fenced Yard | <input type="checkbox"/> Wast Tr/Sys |
| <input type="checkbox"/> Hot Tub | <input type="checkbox"/> Well |

FLOORING

- | | |
|--|--|
| <input type="checkbox"/> Carpet | <input type="checkbox"/> Stone Solid/Composite |
| <input type="checkbox"/> Ceramic/Porcelain | <input type="checkbox"/> Vinyl |
| <input type="checkbox"/> Laminate/Artificial | <input type="checkbox"/> Wood-Solid or Veneer |
| <input type="checkbox"/> Renewable Green | <input type="checkbox"/> Other - None |

INTERIOR AMENITIES

- | | |
|--|--|
| <input type="checkbox"/> Central Vac | <input type="checkbox"/> Humidifier |
| <input type="checkbox"/> Dishwasher | <input type="checkbox"/> Microwave |
| <input type="checkbox"/> Electric Range | <input type="checkbox"/> Pool |
| <input type="checkbox"/> Elevator | <input type="checkbox"/> Refrigerator |
| <input type="checkbox"/> Garden/Soak Tub | <input type="checkbox"/> Security System |
| <input type="checkbox"/> Gas Range | <input type="checkbox"/> Trash Compactor |
| <input type="checkbox"/> Hot Tub | <input type="checkbox"/> Whirlpool Tub |