

iRealty Flat Fee Brokerage

Property Owner Information

Owner's Name: _____
 Address (if different from property listed): _____
 City: _____ State: _____ Zip: _____
 Owner Phone #: _____ Email Address: _____

Listing Information

Address: _____ Unit #: _____ Asking Price: _____
 City: _____ Township: _____ State: _____ Zip: _____
 Parcel # (PIN): _____ County: _____

General

Directions to Property: _____
(50 character limit)

Mgmt. Company Name: _____ Mgmt. Company Phone: _____

Elementary School District: _____ Elementary School Name: _____
 Junior High District: _____ Junior High Name: _____
 High School District: _____ High School Name: _____

Approx Year Built : _____ Built Before 1978 (Y/N): _____ Recent Rehab (Y/N): _____
 Building Has How Many Floors: _____ Total # of Units in Bldg: _____ Waterfront (Y/N): _____
 Currently Leased (Y/N): _____ If Yes, Available Date: _____ Pets Allowed (Y/N): _____

Pet Information:	Type of Property:	General Information:
<input type="checkbox"/> Additional Pet Rent <input type="checkbox"/> Cats OK <input type="checkbox"/> Deposit Required <input type="checkbox"/> Dogs OK <input type="checkbox"/> Pet Count Limitation _____ <input type="checkbox"/> Pet Weight Limitation _____	<input type="checkbox"/> 1/2 Duplex <input type="checkbox"/> Condo <input type="checkbox"/> Condo - Duplex <input type="checkbox"/> Condo - Loft <input type="checkbox"/> Courtyard <input type="checkbox"/> Garden Unit <input type="checkbox"/> Coach House <input type="checkbox"/> Low Rise (1-3) <input type="checkbox"/> Mid Rise (4-6) <input type="checkbox"/> High Rise (7+) <input type="checkbox"/> Studio <input type="checkbox"/> Townhouse - Ranch <input type="checkbox"/> Townhouse - 2 story <input type="checkbox"/> Townhouse - 3+ story <input type="checkbox"/> Vintage <input type="checkbox"/> Penthouse	<input type="checkbox"/> School Bus Service <input type="checkbox"/> Commuter Bus <input type="checkbox"/> Commuter Train <input type="checkbox"/> Flood Zone <input type="checkbox"/> Assisted Living <input type="checkbox"/> Historical District <input type="checkbox"/> None

Exposure:	Common Area Amenities:			
<input type="checkbox"/> North <input type="checkbox"/> South <input type="checkbox"/> East <input type="checkbox"/> West <input type="checkbox"/> City <input type="checkbox"/> Lake/Water <input type="checkbox"/> Park	<input type="checkbox"/> Bike Room <input type="checkbox"/> Boat Dock <input type="checkbox"/> Door Person <input type="checkbox"/> Coin Laundry <input type="checkbox"/> Tennis Courts <input type="checkbox"/> Elevator <input type="checkbox"/> Exercise Room	<input type="checkbox"/> Golf Course <input type="checkbox"/> Health Club <input type="checkbox"/> Park <input type="checkbox"/> Play Ground <input type="checkbox"/> Party Room <input type="checkbox"/> Sun Deck <input type="checkbox"/> Pond-Lake	<input type="checkbox"/> Outdoor Pool <input type="checkbox"/> Indoor Pool <input type="checkbox"/> Cleaners <input type="checkbox"/> On-Site Manager <input type="checkbox"/> Restaurant <input type="checkbox"/> Commissary	

MLS Remarks / Property Description (750 character limit)

Exterior Features

Exterior Building Type:		Lot Description:	
<input type="checkbox"/> Aluminum Vinyl Siding <input type="checkbox"/> Brick <input type="checkbox"/> Cedar <input type="checkbox"/> Frame <input type="checkbox"/> Block <input type="checkbox"/> Glass <input type="checkbox"/> Log <input type="checkbox"/> Masonite <input type="checkbox"/> Shakes	<input type="checkbox"/> Stucco <input type="checkbox"/> Stone <input type="checkbox"/> Marble-Granite <input type="checkbox"/> Concrete <input type="checkbox"/> Asbestos Siding <input type="checkbox"/> Limestone <input type="checkbox"/> Slate <input type="checkbox"/> Clad Trim <input type="checkbox"/> Other	<input type="checkbox"/> Beach <input type="checkbox"/> Chain of Lake Frontage <input type="checkbox"/> Channel Front <input type="checkbox"/> Corner <input type="checkbox"/> Cul-de-sac <input type="checkbox"/> Fenced Yard <input type="checkbox"/> Forest Preserve <input type="checkbox"/> Golf Course Lot <input type="checkbox"/> Horses OK <input type="checkbox"/> Lake Front	<input type="checkbox"/> Professionally Landscaped <input type="checkbox"/> Legal Non-Conforming <input type="checkbox"/> Park Adjacent <input type="checkbox"/> Pond <input type="checkbox"/> Riverfront <input type="checkbox"/> Stream <input type="checkbox"/> Water View <input type="checkbox"/> Wooded <input type="checkbox"/> Rear of Lot <input type="checkbox"/> Irregular

Foundation:	Roof Type:
<input type="checkbox"/> Block <input type="checkbox"/> Brick <input type="checkbox"/> Concrete <input type="checkbox"/> Pillars <input type="checkbox"/> Reinforced Caisson <input type="checkbox"/> Stone <input type="checkbox"/> Wood <input type="checkbox"/> Other	<input type="checkbox"/> Asphalt-Shingle <input type="checkbox"/> Metal <input type="checkbox"/> Rubber <input type="checkbox"/> Slate <input type="checkbox"/> Tar & Gravel <input type="checkbox"/> Tile <input type="checkbox"/> Wood Shank-Shingles <input type="checkbox"/> Other

Exterior Property Features:		
<input type="checkbox"/> Balcony	<input type="checkbox"/> Roof Deck	<input type="checkbox"/> Tennis Court
<input type="checkbox"/> Deck	<input type="checkbox"/> Porch Screened	<input type="checkbox"/> Boat Dock
<input type="checkbox"/> Patio	<input type="checkbox"/> Gazebo	<input type="checkbox"/> Pool - above ground
<input type="checkbox"/> Porch	<input type="checkbox"/> Storage Shed	<input type="checkbox"/> Pool - in ground
<input type="checkbox"/> Green house	<input type="checkbox"/> Dog Run	<input type="checkbox"/> Outdoor Grill
<input type="checkbox"/> Hot Tub	<input type="checkbox"/> Horse Barn	<input type="checkbox"/> Outdoor Fireplace

Parking:	Parking Ownership:	Parking Details:	Driveway:
<input type="checkbox"/> Attached Garage <input type="checkbox"/> Detached Garage # spaces _____ <input type="checkbox"/> Exterior Space(s) # spaces _____ <input type="checkbox"/> None	<input type="checkbox"/> Owned <input type="checkbox"/> Leased Monthly Lease Fee \$ _____ <input type="checkbox"/> Deeded Sold Separately <input type="checkbox"/> Fee-Leased <input type="checkbox"/> N/A	<input type="checkbox"/> Assigned <input type="checkbox"/> Un- Assigned <input type="checkbox"/> Off Alley <input type="checkbox"/> Off Street <input type="checkbox"/> Side Apron <input type="checkbox"/> Zoned Permit <input type="checkbox"/> Visitor Parking <input type="checkbox"/> Valet <input type="checkbox"/> Underground <input type="checkbox"/> Driveway <input type="checkbox"/> None	<input type="checkbox"/> Asphalt <input type="checkbox"/> Brick <input type="checkbox"/> Concrete <input type="checkbox"/> Gravel <input type="checkbox"/> Other

If Deeded, Is Parking Included in Price (Y/N): _____ Is Parking on Site (Y/N): _____

Interior Features

Approximate Square Footage: _____ What Level (Floor) is The Unit On? _____

of Bedrooms _____ # of Full Baths _____ # of Half Baths: _____ Master Bath (Y/N): _____

Basement	Basement Description	
<input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Walkout <input type="checkbox"/> English <input type="checkbox"/> None	<input type="checkbox"/> Finished <input type="checkbox"/> Partially Finished <input type="checkbox"/> Unfinished <input type="checkbox"/> Crawl <input type="checkbox"/> Cellar	<input type="checkbox"/> Sub Basement <input type="checkbox"/> Exterior Access <input type="checkbox"/> Other <input type="checkbox"/> Bathroom Rough-in

Basement Bath (Y/N): _____ # of Fireplaces: _____ Fireplace Location(s): _____

Attic	Bath Amenities	
<input type="checkbox"/> Dormer <input type="checkbox"/> Finished <input type="checkbox"/> Full <input type="checkbox"/> Interior Stair <input type="checkbox"/> Pull Down Stair <input type="checkbox"/> Unfinished	<input type="checkbox"/> MBR-Full <input type="checkbox"/> MBR-Half <input type="checkbox"/> Shared MBR <input type="checkbox"/> Whirlpool <input type="checkbox"/> Sep Shower	<input type="checkbox"/> Handicap Shower <input type="checkbox"/> Steam Shower <input type="checkbox"/> Double Sink <input type="checkbox"/> Bidet

Interior Property Features		
<input type="checkbox"/> Vaulted-Cathedral Ceiling	<input type="checkbox"/> Bar - Wet	<input type="checkbox"/> In Law Arrangement
<input type="checkbox"/> Skylight	<input type="checkbox"/> Elevator	<input type="checkbox"/> 1st Floor Laundry
<input type="checkbox"/> Sauna	<input type="checkbox"/> Hardwood Floors	<input type="checkbox"/> 2nd Floor Laundry
<input type="checkbox"/> Steam Room	<input type="checkbox"/> Wood Laminate Floors	<input type="checkbox"/> Laundry Hook up in Unit
<input type="checkbox"/> Hot Tub	<input type="checkbox"/> Heated Floors	<input type="checkbox"/> Storage
<input type="checkbox"/> Bar - Dry	<input type="checkbox"/> First Floor Bedroom	

Room Details

ROOM DESCRIPTION	DIMENSIONS (L x W)	LEVEL	FLOORING TYPE
Living Room			
Dining Room			
Kitchen			
Family Room			
Master Bedroom			
2 nd Bedroom			
3 rd Bedroom			
4 th Bedroom			
5 th Bedroom			
Other -			
Other -			
Other -			
Other -			

Dining Room	Kitchen Type:	Appliances:	
<input type="checkbox"/> Separate <input type="checkbox"/> With Living Room <input type="checkbox"/> With Family Room <input type="checkbox"/> L Shaped	<input type="checkbox"/> Eat-In Breakfast Bar <input type="checkbox"/> Eat-In Table <input type="checkbox"/> Galley <input type="checkbox"/> Island <input type="checkbox"/> Butler Pantry <input type="checkbox"/> Closet Pantry <input type="checkbox"/> Walk-in Pantry	<input type="checkbox"/> Double Oven <input type="checkbox"/> Oven-Range <input type="checkbox"/> Microwave <input type="checkbox"/> Dishwasher <input type="checkbox"/> Dishwasher Portable <input type="checkbox"/> Refrigerator <input type="checkbox"/> Refrigerator in Bar Area	<input type="checkbox"/> Freezer <input type="checkbox"/> Washer <input type="checkbox"/> Dryer <input type="checkbox"/> Disposal <input type="checkbox"/> Compactor <input type="checkbox"/> Grill Indoors <input type="checkbox"/> Grill Outdoors

Utilities

Air Conditioning:	Water Source:	Sewer:	Electric System:
<input type="checkbox"/> Central Air <input type="checkbox"/> 1 window unit <input type="checkbox"/> 2 window units <input type="checkbox"/> 3+ window units <input type="checkbox"/> Zoned <input type="checkbox"/> None	<input type="checkbox"/> Lake Michigan <input type="checkbox"/> Public <input type="checkbox"/> Private Company <input type="checkbox"/> Well Community <input type="checkbox"/> Well Private <input type="checkbox"/> Well Shared <input type="checkbox"/> Other	<input type="checkbox"/> Septic Mechanical <input type="checkbox"/> Septic Private <input type="checkbox"/> Septic Shared <input type="checkbox"/> Sewer Public <input type="checkbox"/> Other	<input type="checkbox"/> Circuit Breaker <input type="checkbox"/> Fuses <input type="checkbox"/> 200+ Amp Service <input type="checkbox"/> 150Amp Service <input type="checkbox"/> 100Amp Service <input type="checkbox"/> 60Amp Service <input type="checkbox"/> 30Amp Service

Heat/Fuel:	Equipment:
<input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> Propane <input type="checkbox"/> Solar <input type="checkbox"/> Forced Air <input type="checkbox"/> Hot Water-Steam <input type="checkbox"/> Baseboard	<input type="checkbox"/> Humidifier <input type="checkbox"/> Water Softener Owned <input type="checkbox"/> Water Softener Rented <input type="checkbox"/> Central Vacuum <input type="checkbox"/> TV Cable <input type="checkbox"/> TV Dish <input type="checkbox"/> TV Antenna <input type="checkbox"/> Security System
<input type="checkbox"/> Radiant <input type="checkbox"/> Space Heater <input type="checkbox"/> 2 Separate Htg Systems <input type="checkbox"/> Individual Controls <input type="checkbox"/> Zoned <input type="checkbox"/> Other <input type="checkbox"/> None	<input type="checkbox"/> Intercom <input type="checkbox"/> Fire Sprinkler <input type="checkbox"/> CO Detectors <input type="checkbox"/> Ceiling Fans <input type="checkbox"/> Fan Attic Exhaust <input type="checkbox"/> Fan Whole House <input type="checkbox"/> Sump Pump <input type="checkbox"/> Sprinkler Lawn <input type="checkbox"/> Air Exchanger

Taxes and Assessments

Tax Year: _____ Annual Taxes: \$ _____ Homeowners Assoc. (Y/N): _____ Assessment Amt: \$ _____

Property Mgmt Co.: _____ Contact (name & phone): _____

Property Tax Exemptions:	Assessment Frequency:	Assessment Includes:
<input type="checkbox"/> Homeowner <input type="checkbox"/> Senior <input type="checkbox"/> Other <input type="checkbox"/> None	<input type="checkbox"/> Annually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> Other <input type="checkbox"/> N/A	<input type="checkbox"/> Heat <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Water <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Parking <input type="checkbox"/> Property Taxes <input type="checkbox"/> Common Insurance <input type="checkbox"/> Security <input type="checkbox"/> Doorman <input type="checkbox"/> TV Cable
		<input type="checkbox"/> Clubhouse <input type="checkbox"/> Exercise Facility <input type="checkbox"/> Pool <input type="checkbox"/> Exterior Maintenance <input type="checkbox"/> Lawn Care <input type="checkbox"/> Scavenger <input type="checkbox"/> Snow Removal <input type="checkbox"/> Lake Rights <input type="checkbox"/> Other <input type="checkbox"/> None

Misc. Information

Is the Owner a Real Estate Agent (Y/N): _____

Showing Contact Phone #s: 1st: _____ 2nd: _____

Special Showing Instructions (24hr notice, no showings after 7pm, etc.) :

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