



SoCalMLS Commercial Lease Listing Form | Page 1 of 8

Field names with character/selection limits in Tempo contain the limit number in parenthesis (#).

Required fields are listed in **Red**, and denoted by a superscript ^R.

Green Features are highlighted in green. (Green Features are those which **may** conserve energy.)

Property Address

AP Number^R _____ **List Date^R** ____ / ____ / ____ **Expiration Date^R** ____ / ____ / ____

MLS INFORMATION

MLS # System Generated

Property Type^R ☐ Heavy Manufacturing ☐ Office ☐ Retail
(1) ☐ Industrial ☐ Other – See Remarks ☐ Warehouse
☐ Light MFG ☐ Recreation
☐ Mixed Usage ☐ Restaurant/Food Use

Status System Generated

Street Number^R _____ **Direction** ☐ E ☐ N ☐ S ☐ W **Street Name^R** _____

Street Type _____ **Unit #** _____ **City^R** _____ **Area^R** _____

(Example: Avenue, Street, Alley, Circle)

County^R (1) ☐ Alameda (ALA) ☐ Humboldt (HUM) ☐ Merced (MER) ☐ San Benito (SBT) ☐ Siskiyou (SIS)
☐ Alpine (ALP) ☐ Imperial County (IM) ☐ Modoc (MOD) ☐ San Bernardino County (SB) ☐ Solano (SOL)
☐ Amador (AMA) ☐ Inyo (INY) ☐ Mono (MNO) ☐ San Diego County (SD) ☐ Sonoma (SON)
☐ Butte (BUT) ☐ Kern County (KE) ☐ Monterey (MON) ☐ San Francisco (SF) ☐ Stanislaus (STA)
☐ Calaveras (CAL) ☐ Kings (KIN) ☐ Napa (NAP) ☐ San Joaquin (SJ) ☐ Sutter (SUT)
☐ Colusa (COL) ☐ Lake (LAK) ☐ Nevada (NEV) ☐ San Luis Obispo County (SO) ☐ Tehama (THE)
☐ Contra Costa (CC) ☐ Lassen (LAS) ☐ Orange County (OR) ☐ San Mateo (SM) ☐ Trinity (TRI)
☐ Del Norte (DN) ☐ Los Angeles County (LA) ☐ Other State (OS) ☐ Santa Barbara County (BA) ☐ Tulare (TUL)
☐ El Dorado (ED) ☐ Madera (MAD) ☐ Placer (PLA) ☐ Santa Clara (SCL) ☐ Tuolumne (TUO)
☐ Foreign Country (FC) ☐ Marin (MRN) ☐ Plumas (PLU) ☐ Santa Cruz (SCR) ☐ Ventura County (TUO)
☐ Fresno (FRE) ☐ Mariposa (MPA) ☐ Riverside County (RI) ☐ Shasta (SHA) ☐ Yolo (YOL)
☐ Glenn (GLE) ☐ Mendocino (MEN) ☐ Sacramento (SAC) ☐ Sierra (SIE) ☐ Yuba (YUB)

State^R _____ **Zip^R** _____ **Zip 4** _____ **TGNO^R** _____

County^R (1) ☐ Orange (OR) ☐ Ventura (VE) ☐ Other California County (OT)
☐ Los Angeles (LA) ☐ Imperial (IM) ☐ Other State (OS)
☐ Riverside (RI) ☐ Santa Barbara (BA) ☐ Foreign Country (FC)
☐ San Bernardino (SB) ☐ San Luis Obispo (SO)
☐ San Diego (SD) ☐ Kern (KE)

State^R _____ **TGNO^R** _____
Zip^R _____ **Zip 4** _____

Country^R _____ **Cross Streets** _____

\$/Mo^R _____ **AP #^R** _____ **Listing Agreement Type^R** (1) ☐ Exclusive Agency ☐ Open
☐ Exclusive Right To Sell/Lease ☐ Probate
☐ Exclusive Right with Exception

Service Level^R (1) ☐ Full Service **Have** _____ **Business Park Name** _____
☐ Limited Service
☐ MLS Entry Only

Approx Total SqFt^R _____ **Lease Type** (1) ☐ Full Service Gross ☐ Net
☐ Gross ☐ Other
☐ Industrial Gross ☐ Percent
☐ Modified Gross ☐ Sublease
☐ Modified Net ☐ Triple Net
Available SqFt^R _____ **Lease Terms** (1) ☐ Lease Option
☐ Month to Month Lease
☐ Submit Desired Terms

Min Term _____ **Minimum Term Type** ☐ Month ☐ Year **% Clause^R** ☐ Yes ☐ No ☐ Other **Passthru^R** ☐ Y ☐ N

Legal Description (1) ☐ Beach Rights ☐ Open Space Restrictions ☐ Tenants in Common – DRE Pink Reports
☐ Coastal Commission Restrictions ☐ Pet Restrictions ☐ Tenants in Common – DRE White Reports
☐ Environmental Restrictions ☐ Senior Community 55+ ☐ Water Rights

Directions^R (250 Character Limit) _____

Property Description (1000 Character Limit)**Paid by Tenant**

(10)

- | | | |
|------------------------------------------------------|--------------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> ADA Upgrades | <input type="checkbox"/> Insurance | <input type="checkbox"/> Roof Maint |
| <input type="checkbox"/> Air Cond/Heat Maint | <input type="checkbox"/> Interior Maint | <input type="checkbox"/> Seismic Retrofit |
| <input type="checkbox"/> Electricity | <input type="checkbox"/> Janitorial | <input type="checkbox"/> Sign Maint |
| <input type="checkbox"/> Environmental Phase 1 Study | <input type="checkbox"/> Merch. Assn | <input type="checkbox"/> Special Insurance |
| <input type="checkbox"/> Exterior Maint | <input type="checkbox"/> Other-See Remarks | <input type="checkbox"/> Taxes |
| <input type="checkbox"/> Gardener | <input type="checkbox"/> Parking Lot Maint | <input type="checkbox"/> Trash |
| <input type="checkbox"/> Gas | <input type="checkbox"/> Property Management Fee | <input type="checkbox"/> Water |

Tenant Improvements Allowed☐ NA ☐ Y ☐ N**Land & Building Data****Land/Building Features** (25)

- | | | | | |
|-------------------------------------------------------|------------------------------------------------------|-------------------------------------------------|------------------------------------------------------------|----------------------------------------------------------|
| <input type="checkbox"/> 24 Hour Access | <input type="checkbox"/> Fence – Wood | <input type="checkbox"/> Individual Gas Meter | <input type="checkbox"/> Overhead Crane | <input type="checkbox"/> Separate Free Standing Building |
| <input type="checkbox"/> Air Conditioned | <input type="checkbox"/> Fence – Wrought Iron | <input type="checkbox"/> Individual Water Meter | <input type="checkbox"/> Part Of a Larger Building | <input type="checkbox"/> Skylights |
| <input type="checkbox"/> Alley Access | <input type="checkbox"/> Fenced Yard | <input type="checkbox"/> Kitchen Facilities | <input type="checkbox"/> Propane | <input type="checkbox"/> Smoke Alarm |
| <input type="checkbox"/> Balcony | <input type="checkbox"/> Fire Alarms | <input type="checkbox"/> Load Factor | <input type="checkbox"/> Public Sewer | <input type="checkbox"/> Sprinklers/Landscape |
| <input type="checkbox"/> Cable TV | <input type="checkbox"/> Fixtures/Equipment Included | <input type="checkbox"/> Master Electric Meter | <input type="checkbox"/> Rail Siding | <input type="checkbox"/> Storage Area |
| <input type="checkbox"/> Cafeteria/Restaurant On Site | <input type="checkbox"/> Floor Drains | <input type="checkbox"/> Master Gas Meter | <input type="checkbox"/> Rear Access | <input type="checkbox"/> Storage Tank |
| <input type="checkbox"/> Display Window | <input type="checkbox"/> Freeway Visibility | <input type="checkbox"/> Master Water Meter | <input type="checkbox"/> Recreational Facilities Available | <input type="checkbox"/> Street Frontage |
| <input type="checkbox"/> Elevator | <input type="checkbox"/> Furnished | <input type="checkbox"/> Medical Labs On Site | <input type="checkbox"/> Restrooms-Handicapped | <input type="checkbox"/> Truck Dock |
| <input type="checkbox"/> Fence – Block | <input type="checkbox"/> Ground Level Door | <input type="checkbox"/> Mezzanine | <input type="checkbox"/> Restrooms-Public | <input type="checkbox"/> Truck Doors |
| <input type="checkbox"/> Fence – Chain Link | <input type="checkbox"/> Handicapped Access | <input type="checkbox"/> Natural Gas | <input type="checkbox"/> Security System-Leased | <input type="checkbox"/> Truck Well |
| <input type="checkbox"/> Fence – Slump Stone | <input type="checkbox"/> Individual Electric Meter | <input type="checkbox"/> Outside Lighting | <input type="checkbox"/> Security System-Owned | |

Lot Description (20)

- | | | | | |
|------------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------------|--------------------------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> Backs to Parkland | <input type="checkbox"/> Downslope | <input type="checkbox"/> No Landscaping | <input type="checkbox"/> Rolling | <input type="checkbox"/> Street Private |
| <input type="checkbox"/> Back to Trees | <input type="checkbox"/> Estuary Front | <input type="checkbox"/> No Trees | <input type="checkbox"/> Room for a Pool | <input type="checkbox"/> Street Public |
| <input type="checkbox"/> Bay Front | <input type="checkbox"/> Fruit Trees | <input type="checkbox"/> Non-Tidal Wetlands | <input type="checkbox"/> Room for Tennis Court | <input type="checkbox"/> Streetlights |
| <input type="checkbox"/> Beach Access | <input type="checkbox"/> Heavily Treed Lot | <input type="checkbox"/> Non on Thru Street | <input type="checkbox"/> Seasonal Creek | <input type="checkbox"/> Tidal Wetlands |
| <input type="checkbox"/> BLM/National Forest | <input type="checkbox"/> Hill | <input type="checkbox"/> Ocean Access | <input type="checkbox"/> Seawall | <input type="checkbox"/> Upslope |
| <input type="checkbox"/> Canyon Rim | <input type="checkbox"/> Irregular Topography | <input type="checkbox"/> Off the Grid | <input type="checkbox"/> Secluded | <input type="checkbox"/> Utilities – Overhead |
| <input type="checkbox"/> Community Mailbox | <input type="checkbox"/> Lagoon Front | <input type="checkbox"/> On Navigable Water | <input type="checkbox"/> Shade Trees | <input type="checkbox"/> Utilities – Underground |
| <input type="checkbox"/> Compost Area/Bin | <input type="checkbox"/> Lake on Lot | <input type="checkbox"/> Playscape | <input type="checkbox"/> Single Loaded Street | <input type="checkbox"/> Valley |
| <input type="checkbox"/> Creek/Stream on Lot | <input type="checkbox"/> Large Tree(s) – over 40 Feet | <input type="checkbox"/> Possible Pool Site | <input type="checkbox"/> Slope – Gentle | <input type="checkbox"/> Water Access |
| <input type="checkbox"/> Cultivated | <input type="checkbox"/> Level Grade | <input type="checkbox"/> Premium Lot | <input type="checkbox"/> Slope – Steep | |
| <input type="checkbox"/> Curbs-Walks | <input type="checkbox"/> Medium Tree(s) – 20-40 Feet | <input type="checkbox"/> Preserve/Public Land | <input type="checkbox"/> Small Tree(s) – Under 20 Feet | |
| <input type="checkbox"/> Decorative Pond | <input type="checkbox"/> Military Land | <input type="checkbox"/> Private Beach | <input type="checkbox"/> Some Landscaping | |
| <input type="checkbox"/> Desert Back | <input type="checkbox"/> Moderately Treed Lot | <input type="checkbox"/> Private Road | <input type="checkbox"/> Sparsely Treed Lot | |
| <input type="checkbox"/> Desert Front | <input type="checkbox"/> Mountainous | <input type="checkbox"/> Rainwater Collection | <input type="checkbox"/> Stone Retaining Walls | |
| <input type="checkbox"/> Drought Resistant Landscape | <input type="checkbox"/> Native Plant/Reduced Irrigation/Limited Turf | <input type="checkbox"/> Reservoir | <input type="checkbox"/> Street Dirt | |
| | <input type="checkbox"/> Near Public Transit | <input type="checkbox"/> Rip-Rapped | <input type="checkbox"/> Street Paved | |

Land Dimensions**Land SqFt****Lot Size Source**

(1)

- | | |
|-------------------------------------------------|---------------------------------|
| <input type="checkbox"/> Appraiser | <input type="checkbox"/> Other |
| <input type="checkbox"/> Assessor | <input type="checkbox"/> Plans |
| <input type="checkbox"/> Builder | <input type="checkbox"/> Survey |
| <input type="checkbox"/> Estimated | <input type="checkbox"/> Taped |
| <input type="checkbox"/> Landlord/Tenant/Seller | |

Zoning**Water** (3)**Water District****Heat/Air Hours**

- | | | |
|-------------------------------------------------------------------|---------------------------------------------------|------------------------------------------------------|
| <input type="checkbox"/> District/Public | <input type="checkbox"/> Private | <input type="checkbox"/> Well |
| <input type="checkbox"/> Graywater Reuse | <input type="checkbox"/> Public Hook-Up Available | <input type="checkbox"/> Well – Shared |
| <input type="checkbox"/> Lateral not Installed/ Must Tap off Main | <input type="checkbox"/> River | <input type="checkbox"/> Well Permit Applied For |
| <input type="checkbox"/> Meter on Property | <input type="checkbox"/> Shared Spring | <input type="checkbox"/> Well Permit Not Applied For |
| <input type="checkbox"/> Meter Paid/Not In | <input type="checkbox"/> Spring(s) | <input type="checkbox"/> Well Permit on File |
| <input type="checkbox"/> Other | <input type="checkbox"/> Storage Tanks(s) | <input type="checkbox"/> Well/Irrigation Only |
| <input type="checkbox"/> Pond | <input type="checkbox"/> Stream | |
| | <input type="checkbox"/> Tap Free | |

Sewer (3)	<input type="checkbox"/> Aerobic Septic	<input type="checkbox"/> Cesspool	<input type="checkbox"/> In, Connected & Paid	<input type="checkbox"/> Not Applied for Permit	<input type="checkbox"/> Septic Pump
	<input type="checkbox"/> Applied for Permit	<input type="checkbox"/> Gravity Septic Field	<input type="checkbox"/> Lateral/Tap – Off Main	<input type="checkbox"/> Pressure Dose	<input type="checkbox"/> Septic Tank
	<input type="checkbox"/> Assessments	<input type="checkbox"/> Holding Tanks(s)	<input type="checkbox"/> Lateral/Tap – On Site	<input type="checkbox"/> Public Hookup Available	<input type="checkbox"/> Shared Septic
	<input type="checkbox"/> Bonds	<input type="checkbox"/> In Street on Bond	<input type="checkbox"/> Low Pressure Pipe (LPP)	<input type="checkbox"/> Public Septic	<input type="checkbox"/> Site Evaluation on File
	<input type="checkbox"/> Capping Fill	<input type="checkbox"/> In Street Paid	<input type="checkbox"/> Mound System	<input type="checkbox"/> Public Sewer	<input type="checkbox"/> Unknown

Units _____ **Total Building SqFt** _____ **Total Leasable SqFt^R** _____ **Year Built^R** _____ **Year Refurbished** _____
Buildings _____

Bldg SqFt Srce (1)	<input type="checkbox"/> Assessors	<input type="checkbox"/> Other	Leasable SqFt Srce^R (1)	<input type="checkbox"/> Assessors	<input type="checkbox"/> Other	Year Built Srce (1)	<input type="checkbox"/> Appraiser	<input type="checkbox"/> Landlord/Tenant/Seller
	<input type="checkbox"/> Builders	<input type="checkbox"/> Seller		<input type="checkbox"/> Builders	<input type="checkbox"/> Seller		<input type="checkbox"/> Assessor	<input type="checkbox"/> Other
	<input type="checkbox"/> Estimated	<input type="checkbox"/> Taped		<input type="checkbox"/> Estimated	<input type="checkbox"/> Taped		<input type="checkbox"/> Builder	
	<input type="checkbox"/> Landlord/Lessor/Owner			<input type="checkbox"/> Landlord/Lessor/Owner	<input type="checkbox"/> Estimated			

Construction (2)	<input type="checkbox"/> Block	<input type="checkbox"/> Frame	<input type="checkbox"/> Metal	<input type="checkbox"/> Stone	<input type="checkbox"/> Wood	Foundation^R (3)	<input type="checkbox"/> Comination
	<input type="checkbox"/> Brick	<input type="checkbox"/> Frame & Stucco	<input type="checkbox"/> Other	<input type="checkbox"/> Stucco/Brick			<input type="checkbox"/> Concrete Slab
	<input type="checkbox"/> Concrete	<input type="checkbox"/> Glass	<input type="checkbox"/> Siding	<input type="checkbox"/> Stucco/Wood			<input type="checkbox"/> Other
	<input type="checkbox"/> Flagstone	<input type="checkbox"/> Manufacture	<input type="checkbox"/> Steel	<input type="checkbox"/> Tilt Up			<input type="checkbox"/> Raised

Roof (3)	<input type="checkbox"/> Asphalt Shingle	<input type="checkbox"/> Composition Roll	<input type="checkbox"/> Flat Tile	<input type="checkbox"/> Metal	<input type="checkbox"/> Shake	<input type="checkbox"/> Slate
	<input type="checkbox"/> Bahama	<input type="checkbox"/> Concrete	<input type="checkbox"/> Foam	<input type="checkbox"/> Metal Shake	<input type="checkbox"/> Shingle	<input type="checkbox"/> Tile
	<input type="checkbox"/> Barrel Tile	<input type="checkbox"/> Concrete Shake	<input type="checkbox"/> Green Vegetation	<input type="checkbox"/> Other	<input type="checkbox"/> Shingle – Asbestos	<input type="checkbox"/> TPO Membranes
	<input type="checkbox"/> Bitumen	<input type="checkbox"/> Copper	<input type="checkbox"/> Hip	<input type="checkbox"/> Rock/Stone	<input type="checkbox"/> Shingle – Asphalt	
	<input type="checkbox"/> Bituthene	<input type="checkbox"/> Elastomeric	<input type="checkbox"/> Imitation Slate	<input type="checkbox"/> Rolled/Hot Mop	<input type="checkbox"/> Shingle – Wood	
	<input type="checkbox"/> Common Roof	<input type="checkbox"/> Flat Roof	<input type="checkbox"/> Mansard	<input type="checkbox"/> Rubber	<input type="checkbox"/> Slag/Built-Up	

Roof Age _____	Stories^R (1)	<input type="checkbox"/> One Level	<input type="checkbox"/> Three or More Levels	Building Stories _____	Special Study <input type="checkbox"/> NA <input type="checkbox"/> Y <input type="checkbox"/> N
Fire Sprinklers <input type="checkbox"/> NA <input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Split Level	<input type="checkbox"/> Two Levels		Total Floors _____	Flood Zn <input type="checkbox"/> NA <input type="checkbox"/> Y <input type="checkbox"/> N

Location^R (1)	<input type="checkbox"/> Business District	<input type="checkbox"/> Mall	<input type="checkbox"/> South Side of Street	Entry Location^R (2)	<input type="checkbox"/> Elevator to Entry
	<input type="checkbox"/> Corner	<input type="checkbox"/> North Side of Street	<input type="checkbox"/> Stand Alone Location		<input type="checkbox"/> Ground Level – No Steps
	<input type="checkbox"/> Downtown	<input type="checkbox"/> Other	<input type="checkbox"/> Strip Store Center		<input type="checkbox"/> Ground Level w/steps
	<input type="checkbox"/> East Side of Street	<input type="checkbox"/> Professional Center	<input type="checkbox"/> West Side of Street		<input type="checkbox"/> Mid Level
	<input type="checkbox"/> Industrial District	<input type="checkbox"/> Retail Frontage			<input type="checkbox"/> Penthouse
	<input type="checkbox"/> Interior Block/Ctr	<input type="checkbox"/> Shopping Center			<input type="checkbox"/> Top Level

Seismic Hazard ☐ NA ☐ Y ☐ N **Parking Spaces^R** _____

Parking Type (8)	<input type="checkbox"/> Above Street Level Parking	<input type="checkbox"/> Driveway – Concrete	<input type="checkbox"/> Gated Parking	<input type="checkbox"/> Oversized Garage	<input type="checkbox"/> Shared Driveway
	<input type="checkbox"/> Assigned Parking	<input type="checkbox"/> Driveway – Gravel	<input type="checkbox"/> Gated Underground Parking	<input type="checkbox"/> Parking Fee	<input type="checkbox"/> Side by Side Parking
	<input type="checkbox"/> Auto Driveway Gate	<input type="checkbox"/> Driveway – Pavers	<input type="checkbox"/> Heated Garage	<input type="checkbox"/> Parking Space Conveys	<input type="checkbox"/> Sink in Garage
	<input type="checkbox"/> Boat Parking	<input type="checkbox"/> Driveway Gate	<input type="checkbox"/> Interior Access	<input type="checkbox"/> Permit/Decal	<input type="checkbox"/> Street
	<input type="checkbox"/> Built-In Storage	<input type="checkbox"/> Employees	<input type="checkbox"/> Metered	<input type="checkbox"/> Pipestem Driveway	<input type="checkbox"/> Subterranean/Structure
	<input type="checkbox"/> Circular Driveway	<input type="checkbox"/> Garage – 4+ Doors	<input type="checkbox"/> Off Site Parking	<input type="checkbox"/> Porte-Cochere	<input type="checkbox"/> Tandem
	<input type="checkbox"/> Community Garage	<input type="checkbox"/> Garage – Extended Length	<input type="checkbox"/> Off Street Parking	<input type="checkbox"/> Private	<input type="checkbox"/> Unassigned Parking
	<input type="checkbox"/> Controlled Entrance	<input type="checkbox"/> Garage – Front Entry	<input type="checkbox"/> Offsite Parking for Guests	<input type="checkbox"/> Public	<input type="checkbox"/> Uncovered
	<input type="checkbox"/> Covered Parking	<input type="checkbox"/> Garage – Rear Entry	<input type="checkbox"/> On Site	<input type="checkbox"/> Rotational	<input type="checkbox"/> Under Home Parking
	<input type="checkbox"/> Covered/Subterranean	<input type="checkbox"/> Garage – Side Entry	<input type="checkbox"/> On Street Parking	<input type="checkbox"/> RV Complex/Park	<input type="checkbox"/> Valet Parking
	<input type="checkbox"/> Deck(s)	<input type="checkbox"/> Garage – Single Door	<input type="checkbox"/> Onsite Parking for Guests	<input type="checkbox"/> RV Covered	<input type="checkbox"/> Workbench in Garage
	<input type="checkbox"/> Deeded Parking/Garage	<input type="checkbox"/> Garage – Swing In	<input type="checkbox"/> Open	<input type="checkbox"/> RV Enclosed	<input type="checkbox"/> Workshop
	<input type="checkbox"/> Driveway – Brick	<input type="checkbox"/> Garage – Three Door	<input type="checkbox"/> Other Parking	<input type="checkbox"/> RV Gated	
	<input type="checkbox"/> Driveway – Combination	<input type="checkbox"/> Garage – Two Door	<input type="checkbox"/> Overhead Storage	<input type="checkbox"/> RV Hook-Ups	

Security Description (9)	<input type="checkbox"/> After Hours	<input type="checkbox"/> Exterior Cameras	<input type="checkbox"/> Firewall(s)	<input type="checkbox"/> Non-Monitored
	<input type="checkbox"/> Automatic Fire Sprinkler System Throughout	<input type="checkbox"/> Exterior Security Lights	<input type="checkbox"/> Gated Parking	<input type="checkbox"/> Prewired for Alarm System
	<input type="checkbox"/> Automatic Gate	<input type="checkbox"/> Fire and Smoke Detection System	<input type="checkbox"/> Guarded Parking	<input type="checkbox"/> Resident Manager
	<input type="checkbox"/> Carbon Monoxide Detector(s)	<input type="checkbox"/> Fire Rated Drywall	<input type="checkbox"/> Intercom	<input type="checkbox"/> Security System – Leased
	<input type="checkbox"/> Card/Code Access	<input type="checkbox"/> Fire Sprinkler System	<input type="checkbox"/> Motion Detectors	<input type="checkbox"/> Security System – Owned

Parking Ratio *System Generated* **ADA Compliant^R** ☐ NA ☐ Y ☐ N

Suited For (16)	<input type="checkbox"/> Automotive/Service Stations	<input type="checkbox"/> Food Services	<input type="checkbox"/> Medical Office	<input type="checkbox"/> Service
	<input type="checkbox"/> Beauty Shop	<input type="checkbox"/> General Office	<input type="checkbox"/> Mixed Use	<input type="checkbox"/> Shopping Center
	<input type="checkbox"/> Coin Operated	<input type="checkbox"/> Gift/Florist/Card Shops	<input type="checkbox"/> Other	<input type="checkbox"/> Taverns/Cocktail Lounges
	<input type="checkbox"/> Convenience Market/Dairy/Supermarket	<input type="checkbox"/> Liquor Stores	<input type="checkbox"/> Professional Office	<input type="checkbox"/> Video Store
	<input type="checkbox"/> Distribution/Wholesale	<input type="checkbox"/> Lodging	<input type="checkbox"/> Residential	<input type="checkbox"/> Warehouse
	<input type="checkbox"/> Dry Cleaners	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Retail	

Green Features

<input type="checkbox"/> Earthcraft House	<input type="checkbox"/> FSC Certified Wood Products	<input type="checkbox"/> Low Flow Faucets	<input type="checkbox"/> Recycled Building Materials	<input type="checkbox"/> Wind Generator
<input type="checkbox"/> Energy Audit Available	<input type="checkbox"/> IAQ Tested	<input type="checkbox"/> Other, See Remarks	<input type="checkbox"/> Smart Electric Meter	<input type="checkbox"/> Windmill
<input type="checkbox"/> Energy Recovery Ventilator	<input type="checkbox"/> ICF Compatible Fixtures	<input type="checkbox"/> Photovoltaics	<input type="checkbox"/> Solar Electricity	
<input type="checkbox"/> Environments for Living Rated	<input type="checkbox"/> Locally Sourced Building Materials	<input type="checkbox"/> Rain/Freeze Sensors	<input type="checkbox"/> Turbines	

Green Building Certification**Green Certifying Body****Green Year Certified****Green Certification Rating****Industrial Space Data****Heat (Industrial) (13)**

<input type="checkbox"/> Baseboard	<input type="checkbox"/> Gas	<input type="checkbox"/> Propane	<input type="checkbox"/> Wall
<input type="checkbox"/> Electric	<input type="checkbox"/> Gravity Heating	<input checked="" type="checkbox"/> Radiant	<input type="checkbox"/> Wood Stove
<input type="checkbox"/> Floor Furnace	<input type="checkbox"/> Heat Pump	<input checked="" type="checkbox"/> Solar	
<input type="checkbox"/> Forced Air	<input type="checkbox"/> Other – See Remarks	<input type="checkbox"/> Space Heater	

Plant SqFt

Cooling (Industrial) ☐ NA ☐ Y ☐ N**Amps**

Voltage

Phase

Loading Doors

Docks

Wells

Ground Level Docks

Toilets – Men (Industrial)

Toilets – Women (Industrial)

Skylights ☐ NA ☐ Y ☐ N**Foil**☐ NA ☐ Y ☐ N**Fenced SqFt**

Minimum Clearance Height

Span

Storage Tanks

Overhead Cranes

Railroad Access☐ NA ☐ Y ☐ N**Office SqFt (Industrial)**

Offices (Industrial)

Ind Office Restrooms (Total)

Ind Office Restrooms (Handicap)

Ind Office Restrooms (Common)

A/C (Ind)

(2)

<input type="checkbox"/> Central
<input type="checkbox"/> Electric
<input type="checkbox"/> Evaporative
<input type="checkbox"/> Gas
<input type="checkbox"/> Heat Pump
<input type="checkbox"/> Other – See Remarks
<input type="checkbox"/> Refrigerated
<input type="checkbox"/> Wall Unit
<input type="checkbox"/> Window Unit

Heat (Ind - Office)

(12)

<input type="checkbox"/> Electric
<input type="checkbox"/> Floor Furnace
<input type="checkbox"/> Forced Air
<input type="checkbox"/> Gravity Heating
<input type="checkbox"/> Heat Pump
<input type="checkbox"/> Other – See Remarks
<input type="checkbox"/> Propane
<input type="checkbox"/> Radiant
<input checked="" type="checkbox"/> Solar
<input type="checkbox"/> Space Heater
<input type="checkbox"/> Wall Electric
<input type="checkbox"/> Wall Gas
<input type="checkbox"/> Wood Stove

Heat (Plant)

(13)

<input type="checkbox"/> Baseboard
<input type="checkbox"/> Electric
<input type="checkbox"/> Floor Furnace
<input type="checkbox"/> Forced Air
<input type="checkbox"/> Gas
<input type="checkbox"/> Gravity Heating
<input type="checkbox"/> Heat Pump
<input type="checkbox"/> Other – See Remarks
<input type="checkbox"/> Propane
<input type="checkbox"/> Radiant
<input checked="" type="checkbox"/> Solar
<input type="checkbox"/> Space Heater
<input type="checkbox"/> Wall

Floor Type (Ind)

(10)

<input type="checkbox"/> Ceramic Tile
<input type="checkbox"/> Concrete Slab
<input type="checkbox"/> Hardwood
<input type="checkbox"/> Marble
<input type="checkbox"/> Other
<input type="checkbox"/> Parquet
<input type="checkbox"/> Sheet Vinyl
<input type="checkbox"/> Vinyl Tile
<input type="checkbox"/> Wall-to-Wall Carpet
<input type="checkbox"/> Wood

Window Coverings (Industrial) ☐ NA ☐ Y ☐ N**Elevator (Industrial)** ☐ NA ☐ Y ☐ N**Signage (Industrial)** ☐ NA ☐ Y ☐ N**Office/Professional Space****Total Office SF**

Offices (O/P)

Location Type

(16)

<input type="checkbox"/> Business Park	<input type="checkbox"/> Neighborhood Center
<input type="checkbox"/> Corner	<input type="checkbox"/> Old Town
<input type="checkbox"/> Discount Mall/Outlet	<input type="checkbox"/> Other/See Remarks
<input type="checkbox"/> Downtown	<input type="checkbox"/> Redevelopment Area
<input type="checkbox"/> Free Standing	<input type="checkbox"/> Regional Mall
<input type="checkbox"/> High Rise	<input type="checkbox"/> Strip Center
<input type="checkbox"/> Industrial Park	<input type="checkbox"/> Town Center
<input type="checkbox"/> Medical Center	<input type="checkbox"/> Waterfront

Location within Building

<input type="checkbox"/> Balcony/Mezzanine	<input type="checkbox"/> Portion of a Larger Suite
<input type="checkbox"/> Basement	<input type="checkbox"/> Subdivisible
<input type="checkbox"/> Executive Suite	<input type="checkbox"/> Various Location/Floors
<input type="checkbox"/> Ground Floor	
<input type="checkbox"/> Mid Level	
<input type="checkbox"/> Mid-Level Suite	
<input type="checkbox"/> Other/See Remarks	
<input type="checkbox"/> Penthouse	

A/C (OP) (8)

<input type="checkbox"/> Central	<input type="checkbox"/> Refrigerated
<input type="checkbox"/> Electric	<input type="checkbox"/> Wall Unit
<input type="checkbox"/> Evaporative	<input type="checkbox"/> Window Unit
<input type="checkbox"/> Gas	
<input type="checkbox"/> Heat Pump	
<input type="checkbox"/> Other-See Remarks	

Heat (O/P) (13)

<input type="checkbox"/> Baseboard	<input type="checkbox"/> Heat Pump	<input type="checkbox"/> Wall
<input type="checkbox"/> Electric	<input type="checkbox"/> Other-See Remarks	<input type="checkbox"/> Wood Stove
<input type="checkbox"/> Floor Furnace	<input type="checkbox"/> Propane	
<input type="checkbox"/> Forced Air	<input type="checkbox"/> Radiant	
<input type="checkbox"/> Gas	<input checked="" type="checkbox"/> Solar	
<input type="checkbox"/> Gravity Heating	<input type="checkbox"/> Space Heater	

Floor Type (O/P)

(10)

<input type="checkbox"/> Ceramic Tile	<input type="checkbox"/> Parquet
<input type="checkbox"/> Concrete Slab	<input type="checkbox"/> Sheet Vinyl
<input type="checkbox"/> Hardwood	<input type="checkbox"/> Vinyl Tile
<input type="checkbox"/> Marble	<input type="checkbox"/> Wall-to-Wall Carpet
<input type="checkbox"/> Other	<input type="checkbox"/> Wood

Window Coverings (O/P)☐ NA ☐ Y ☐ N**Elevator (O/P)**☐ NA ☐ Y ☐ N**OP Features**☐ Secretarial Services Available**Signage (O/P)**☐ NA ☐ Y ☐ N

O/P Restrooms (Total) _____ # O/P Restrooms (Handicap) _____ # O/P Restrooms (Common) _____

Janitorial ☐ NA ☐ Y ☐ N Janitor Days/Weeks _____

Retail/Commercial Space Data

Total Retail SqFt _____ Office SqFt (Retail) _____

Location Type (Retail) (16)

- | | |
|-----------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Business Park | <input type="checkbox"/> Neighborhood Center |
| <input type="checkbox"/> Corner | <input type="checkbox"/> Old Town |
| <input type="checkbox"/> Discount Mall/Outlet | <input type="checkbox"/> Other/See Remarks |
| <input type="checkbox"/> Downtown | <input type="checkbox"/> Redevelopment Area |
| <input type="checkbox"/> Free Standing | <input type="checkbox"/> Regional Mall |
| <input type="checkbox"/> High Rise | <input type="checkbox"/> Strip Center |
| <input type="checkbox"/> Industrial Park | <input type="checkbox"/> Town Center |
| <input type="checkbox"/> Medical Center | <input type="checkbox"/> Waterfront |

Location within Building (Retail) (11)

- | | |
|--------------------------------------------|----------------------------------------------------|
| <input type="checkbox"/> Balcony/Mezzanine | <input type="checkbox"/> Portion of a Larger Suite |
| <input type="checkbox"/> Basement | <input type="checkbox"/> Subdivisible |
| <input type="checkbox"/> Executive Suite | <input type="checkbox"/> Various Location/Floors |
| <input type="checkbox"/> Ground Floor | |
| <input type="checkbox"/> Mid Level | |
| <input type="checkbox"/> Multi-Level Suite | |
| <input type="checkbox"/> Other/See Remarks | |
| <input type="checkbox"/> Penthouse | |

Type of Retail (1)

- | | |
|----------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Food Services | <input type="checkbox"/> Other-See Remarks |
| <input type="checkbox"/> Medical | <input type="checkbox"/> Professional Office |

Min Ceiling Height Storage Space

☐ NA ☐ Y ☐ N

Restricted Use ☐ NA ☐ Y ☐ N

Current Use _____

Improvements (11)

- | | |
|-------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Air Conditioning | <input type="checkbox"/> Ground Level Door |
| <input type="checkbox"/> Elevator | <input type="checkbox"/> Security System |
| <input type="checkbox"/> Fenced Yard | <input type="checkbox"/> Skylights |
| <input type="checkbox"/> Fire Sprinkler | <input type="checkbox"/> Truck Dock |
| <input type="checkbox"/> Fixtures/Equip | <input type="checkbox"/> Truck Well |
| <input type="checkbox"/> Furnished | |

Building Permit

☐ NA ☐ Y ☐ N

Traffic Count Available

☐ NA ☐ Y ☐ N

Anchor Tenant

☐ NA ☐ Y ☐ N

Anchor Name

Public Transportation

☐ NA ☐ Y ☐ N

A/C (Retail) (2)

- | | |
|--------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Central | <input type="checkbox"/> Other-See Remarks |
| <input type="checkbox"/> Electric | <input type="checkbox"/> Refrigerated |
| <input type="checkbox"/> Evaporative | <input type="checkbox"/> Wall Unit |
| <input type="checkbox"/> Gas | <input type="checkbox"/> Window Unit |
| <input type="checkbox"/> Heat Pump | |

Heat (Retail) (13)

- | | | |
|----------------------------------------|--------------------------------------------|---------------------------------------|
| <input type="checkbox"/> Baseboard | <input type="checkbox"/> Gravity Heating | <input type="checkbox"/> Solar |
| <input type="checkbox"/> Electric | <input type="checkbox"/> Heat Pump | <input type="checkbox"/> Space Heater |
| <input type="checkbox"/> Floor Furnace | <input type="checkbox"/> Other-See Remarks | <input type="checkbox"/> Wall |
| <input type="checkbox"/> Forced Air | <input type="checkbox"/> Propane | <input type="checkbox"/> Wood stove |
| <input type="checkbox"/> Gas | <input type="checkbox"/> Radiant | |

Floor Type (Retail) (10)

- | | |
|----------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Ceramic Tile | <input type="checkbox"/> Parquet |
| <input type="checkbox"/> Concrete Slab | <input type="checkbox"/> Sheet Vinyl |
| <input type="checkbox"/> Hardwood | <input type="checkbox"/> Vinyl Tile |
| <input type="checkbox"/> Marble | <input type="checkbox"/> Wall-to-Wall Carpet |
| <input type="checkbox"/> Other | <input type="checkbox"/> Wood |

Window Coverings (Retail) ☐ NA ☐ Y ☐ N

Elevator (Retail) ☐ NA ☐ Y ☐ N

Signage (Retail) ☐ NA ☐ Y ☐ N

Retail Restrooms (Total) _____ # Retail Restrooms (Handicap) _____ # Retail Restrooms (Common) _____

Showing Instructions

Showing Instructions^R (11)

- | | | | |
|---------------------------------------------------------------|---------------------------------------------------|-----------------------------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> 24-Hour Notice | <input type="checkbox"/> Appointment with Office | <input type="checkbox"/> Gate Pass | <input type="checkbox"/> Restricted Hours |
| <input type="checkbox"/> Agent or Owner to be Present | <input type="checkbox"/> BEWARE OF DOG | <input type="checkbox"/> Go Direct | <input type="checkbox"/> See Remarks |
| <input type="checkbox"/> Alarm on Property | <input type="checkbox"/> Call First | <input type="checkbox"/> Key in Listing Office | <input type="checkbox"/> Sign on Property |
| <input type="checkbox"/> Animal(s) on Property | <input type="checkbox"/> Call Listing Office | <input type="checkbox"/> Keybox | <input type="checkbox"/> Subject to Inspection |
| <input type="checkbox"/> Appointment Only | <input type="checkbox"/> Day Sleeper | <input type="checkbox"/> Pet(s) on Premises | <input type="checkbox"/> Vacant |
| <input type="checkbox"/> Appointment Only with Listing Office | <input type="checkbox"/> Do Not Contact Occupants | <input type="checkbox"/> Registration Required | |
| <input type="checkbox"/> Appointment Only with Occupant | <input type="checkbox"/> Drive By | <input type="checkbox"/> Restricted Access – Call Listing Agent | |
| <input type="checkbox"/> Appointment with Occupant | <input type="checkbox"/> Drive By Only | <input type="checkbox"/> Restricted Days | |

S/O Comp^R _____ S/O Comp^R ☐ \$ ☐ % Variable Rate Comm^R ☐ Yes ☐ No

Transfer of Possession (1)

- | | |
|------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Close of Escrow | <input type="checkbox"/> COE Plus 3 |
| <input type="checkbox"/> COE Plus | <input type="checkbox"/> Negotiable |
| <input type="checkbox"/> COE Plus 1 | <input type="checkbox"/> Other – See Remarks |
| <input type="checkbox"/> COE Plus 2 | |

Compensation Option^R

(4) ☐ Call Listing Office
☐ No
☐ See Remarks
☐ Yes

Graduated Commission Schedule^R

☐ Y ☐ N

Lockbox Type^R (2)

- | |
|---------------------------------------------------------|
| <input type="checkbox"/> Supra iBox |
| <input type="checkbox"/> Supra-SRAR/BAOR |
| <input type="checkbox"/> Call Listing Office |
| <input type="checkbox"/> No Key Safe |
| <input type="checkbox"/> Other-See Remarks |
| <input type="checkbox"/> SentriLock |
| <input type="checkbox"/> Commercial/Industrial Lock Box |

Lockbox Location^R (1)

- | | |
|----------------------------------------------|--------------------------------------|
| <input type="checkbox"/> Call Listing Office | <input type="checkbox"/> See Remarks |
| <input type="checkbox"/> Front Door | <input type="checkbox"/> Side Door |
| <input type="checkbox"/> Front Gate | <input type="checkbox"/> Side Gate |
| <input type="checkbox"/> Garage Door | <input type="checkbox"/> Sign Post |
| <input type="checkbox"/> Gas Meter | <input type="checkbox"/> Vault |
| <input type="checkbox"/> No Key Safe | <input type="checkbox"/> Water Pipe |
| <input type="checkbox"/> Rear Door | |

Sign on Property^R ☐ Y ☐ N

Gate Code _____

Phone To Show^R _____

Show Phone Ext _____

List Office/Agent Information

Fields denoted with an asterisk* are "System Generated" in Tempo.

List Office Name* _____ List Office ID*^R _____
List Office Phone* _____ List Office Fax* _____
List Agent Full Name* _____ List Agent First Name* _____
List Agent Last Name* _____ List Agent ID*^R _____
List Agent Preferred Phone^R _____ List Agent Preferred Phone Ext _____ List Agent Res Phone _____
Agent Direct Phone Number _____ Agent Toll Free Phone Number _____
List Agent Pref Fax _____ List Agent Cell Phone _____ List Agent Pager _____
List Agent Voicemail^R _____ List Agent Voicemail Ext _____ List Agent Email _____
List Agent Website _____ List Agent Blog Website _____
Recip Listing^R ☐ Y ☐ N

Co List Office/Agent Information

Co List Agent ID* _____ Co List Agent Full Name* _____
Co List Agent First Name* _____ Co List Agent Last Name* _____

Co List Office/Agent Information (Continued)

Co List Agent Preferred Phone _____ Co List Agent Preferred Phone Ext _____ Co List Agent Res Phone _____
CoList Agent Direct Phone Number _____ CoList Agent Toll Free Phone Number _____
Co List Agent Pref Fax _____ Co List Agent Pager _____ Co List Agent Cell Phone _____
Co List Agent Voicemail _____ Co List Agent Voicemail Ext _____ Co List Office ID _____
Co List Agent Email _____ Co List Office Fax _____
Co List Office Name _____

Sell Office/Agent Information

Sell Office Name* _____ Sell Office ID* _____
Sell Office Phone* _____ Sell Office Fax* _____
Sell Agent Full Name* _____ Sell Agent First Name* _____
Sell Agent Last Name* _____ Sell Agent ID* _____
Sell Agent Preferred Phone _____ Sell Agent Preferred Phone Ext _____ Sell Agent Res Phone _____
Sell Agent Pref Fax _____ Sell Agent Cell Phone _____ Sell Agent Pager _____
Sell Agent Voicemail _____ Sell Agent Voicemail Ext _____ Sell Agent Email _____
Sell Agent Website _____ Sell Agent Blog Website _____

Co Sell Office/Agent Information

Co Sell Agent Full Name _____ Co Sell Agent First Name _____
Co Sell Agent Last Name _____ Co Sell Agent ID _____
Co Sell Agent Preferred Phone _____ Co Sell Agent Preferred Phone Ext _____ Co Sell Agent Res Phone _____
Co Sell Agent Pref Fax _____ Co Sell Agent Cell Phone _____ Co Sell Agent Pager _____

Co Sell Office/Agent Information *(Continued)*

Co Sell Agent Voicemail _____ Co Sell Agent Voicemail Ext _____ Co Sell Office ID _____
Co Sell Office Phone _____ Co Sell Agent Email _____

Agent Remarks

Agent Remarks *(600 Character Limit)* _____

Internet Information

Address on Internet? ^R ☐ Y ☐ N IDX ^R ☐ Y ☐ N Public Comments/Blog ^R ☐ Y ☐ N AVM ^R ☐ Y ☐ N

Listing Activity

List Date ^R ____ / ____ / ____ Expiration Date ^R ____ / ____ / ____

Units

Units can be accessed in Tempo by clicking "Edit Units" on the floating toolbar, to the left of the input page.

Unit #	Address or Space #	SqFt	\$ / SqFt	Dim	Mo Rent	Maint Charge	Lease Term	Poss	Lse Type <i>(See Below)</i>
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

Available entries for "Lease Type": Full Service Gross, Gross, Industrial Gross, Modified Gross, Net, Modified Net, Triple Net, Other-See Remarks, Percent, Sublease.

Change to Pending/Backup Offers

Pending (Projected Sale) Price \$ ^R _____ Projected Close Date ^R ____ / ____ / ____

(Listing will Auto-Sell 14 days after the Projected Close Date)

Pending Date ^R ____ / ____ / ____ Sell Agent ^R *(Agent ID)* _____ Co Sell Agent *(Agent ID)* _____

Financing ^R *(1)*

<input type="checkbox"/> All Inclusive Trust Deed	<input type="checkbox"/> FHA Loan	<input type="checkbox"/> Trust Conveyance
<input type="checkbox"/> Assumed	<input type="checkbox"/> Land Contract	<input type="checkbox"/> VA Loan
<input type="checkbox"/> Cal Vet	<input type="checkbox"/> Other – See Remarks – Call Listing Office	
<input type="checkbox"/> Cash	<input type="checkbox"/> Owner Carried	
<input type="checkbox"/> Conventional	<input type="checkbox"/> Private	

Sold Terms *(1)*

<input type="checkbox"/> Auction	<input type="checkbox"/> Lease Option
<input type="checkbox"/> Buyer Concessions	<input type="checkbox"/> Real Estate Owned
<input type="checkbox"/> Contract Of Sale	<input type="checkbox"/> Seller Concessions
<input type="checkbox"/> Exchange/Trade	<input type="checkbox"/> Short Payoff
<input type="checkbox"/> In Foreclosure	<input type="checkbox"/> Standard Sale

Leased Information

Leased Price^R _____ **Leased Date^R** ____ / ____ / ____ **Pending Date^R** ____ / ____ / ____

Leasing Agent^R (Agent ID) _____ **Co Leasing Agent** (Agent ID) _____

"The accuracy of all information, including square footage and lot sizes is deemed reliable but not guaranteed and should be independently Verified through personal inspection with the appropriate professionals."

Signature Date

Signature Date

Signature Date

Signature Date