

Business Opportunity

Greater Southern MLS Data Listing Input Form

Required fields are denoted with a red asterisk (*) and conditionally required fields are denoted with a double red asterisk (**).

Status

*Listing Status: Active (Property is open to offers and IS available for showings)

Basics

Listing Information:

*List Price: _____ List Price Low: _____ *Parcel Number/Tax ID: _____

Additional Parcels? Yes No Additional Parcels (Separated By Comma): _____

Seller Consider Concessions? Yes No

*Listing Contract Date: _____ *Expiration Date: _____ One Time Listing YN? Yes No

Flood Zone Classification: <input type="checkbox"/> A <input type="checkbox"/> AR <input type="checkbox"/> B, X (shaded) <input type="checkbox"/> AE, A1-A30 <input type="checkbox"/> A99 <input type="checkbox"/> C, X (unshaded) <input type="checkbox"/> AH <input type="checkbox"/> V <input type="checkbox"/> D <input type="checkbox"/> AO <input type="checkbox"/> VE, V1-V30	Flood Zone Source: <input type="checkbox"/> FEMA <input type="checkbox"/> Elevation Certificate <input type="checkbox"/> LSU AG <input type="checkbox"/> Other	Zoning Type: <input type="checkbox"/> Agricultural <input type="checkbox"/> Open <input type="checkbox"/> Commercial <input type="checkbox"/> Other <input type="checkbox"/> Industrial <input type="checkbox"/> Residential <input type="checkbox"/> MultiUse <input type="checkbox"/> See Remarks
---	---	--

Zoning Code: _____

*Legal Description: _____

Parish/City/Subdivision:

*Parish/County: _____ *City: _____

Address Information:

*Street #: _____ Str Number Ext: _____

Str Direction Prefix: East North Northeast Northwest South Southeast Southwest West

*Street Name: _____

Str Suffix: <input type="checkbox"/> Alley <input type="checkbox"/> Cove <input type="checkbox"/> Highway <input type="checkbox"/> Parkway <input type="checkbox"/> Point <input type="checkbox"/> Terrace <input type="checkbox"/> None <input type="checkbox"/> Avenue <input type="checkbox"/> Cut / Cutoff <input type="checkbox"/> Interstate <input type="checkbox"/> Pass / Bypass <input type="checkbox"/> Rise <input type="checkbox"/> Trace <input type="checkbox"/> Other <input type="checkbox"/> Boulevard <input type="checkbox"/> Drive <input type="checkbox"/> Island <input type="checkbox"/> Pathway <input type="checkbox"/> Road <input type="checkbox"/> Trail <input type="checkbox"/> Causeway <input type="checkbox"/> Expressway <input type="checkbox"/> Lane <input type="checkbox"/> Pike <input type="checkbox"/> Run <input type="checkbox"/> Turnpike <input type="checkbox"/> Circle <input type="checkbox"/> Freeway <input type="checkbox"/> Loop <input type="checkbox"/> Place <input type="checkbox"/> Square <input type="checkbox"/> Walk <input type="checkbox"/> Court <input type="checkbox"/> Heights <input type="checkbox"/> Mall <input type="checkbox"/> Plaza <input type="checkbox"/> Street <input type="checkbox"/> Way
--

Str Suffix Modifier: _____ Str Direction Suffix: E N NE NW S SE SW W

Unit #: _____ *State: _____

*Postal Code: _____ Postal Code +4: _____ *City Limits: Yes No Country: _____

*Directions: _____

Basic Information:

*Business Type:

<input type="checkbox"/> Accounting	<input type="checkbox"/> Build to Suit	<input type="checkbox"/> Employment	<input type="checkbox"/> Landscaping	<input type="checkbox"/> Regional Center
<input type="checkbox"/> Administrative and Support	<input type="checkbox"/> Butcher	<input type="checkbox"/> Farm	<input type="checkbox"/> Laundromat	<input type="checkbox"/> Rental
<input type="checkbox"/> Adult Family Home	<input type="checkbox"/> Cabinets	<input type="checkbox"/> Ranch	<input type="checkbox"/> Liquor Store	<input type="checkbox"/> Restaurant
<input type="checkbox"/> Advertising	<input type="checkbox"/> Candy/Cookie	<input type="checkbox"/> Fast Food	<input type="checkbox"/> Live/Work	<input type="checkbox"/> Retail
<input type="checkbox"/> Agriculture	<input type="checkbox"/> Car Wash	<input type="checkbox"/> Financial	<input type="checkbox"/> Locksmith	<input type="checkbox"/> Saddlery/Harness
<input type="checkbox"/> Animal Grooming	<input type="checkbox"/> Carpet/Tile	<input type="checkbox"/> Fitness	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Showroom
<input type="checkbox"/> Appliances	<input type="checkbox"/> Child Care	<input type="checkbox"/> Florist/Nursery	<input type="checkbox"/> Medical	<input type="checkbox"/> Single-Tenant
<input type="checkbox"/> Aquarium Supplies	<input type="checkbox"/> Church	<input type="checkbox"/> Food & Beverage	<input type="checkbox"/> Mixed	<input type="checkbox"/> Special Use
<input type="checkbox"/> Arts and Entertainment	<input type="checkbox"/> Clothing	<input type="checkbox"/> Forest Reserve	<input type="checkbox"/> Mobile/Trailer Park	<input type="checkbox"/> Sporting Goods
<input type="checkbox"/> Athletic	<input type="checkbox"/> Commercial	<input type="checkbox"/> Franchise	<input type="checkbox"/> Multi-Tenant	<input type="checkbox"/> Stand-Alone
<input type="checkbox"/> Auto Body	<input type="checkbox"/> Computer	<input type="checkbox"/> Furniture	<input type="checkbox"/> Music	<input type="checkbox"/> Storage
<input type="checkbox"/> Auto Dealer	<input type="checkbox"/> Condominium	<input type="checkbox"/> Gas Station	<input type="checkbox"/> Nursing Home	<input type="checkbox"/> Strip Mall
<input type="checkbox"/> Auto Glass	<input type="checkbox"/> Construction/Contractor	<input type="checkbox"/> Gift Shop	<input type="checkbox"/> Office Supply	<input type="checkbox"/> Toys
<input type="checkbox"/> Auto Parts	<input type="checkbox"/> Convalescent	<input type="checkbox"/> Government	<input type="checkbox"/> Other	<input type="checkbox"/> Transportation
<input type="checkbox"/> Auto Rent/Lease	<input type="checkbox"/> Convenience Store	<input type="checkbox"/> Grocery	<input type="checkbox"/> Pad(s)	<input type="checkbox"/> Travel
<input type="checkbox"/> Auto Repair-Specialty	<input type="checkbox"/> Dance Studio	<input type="checkbox"/> Hardware	<input type="checkbox"/> Paints	<input type="checkbox"/> Upholstery
<input type="checkbox"/> Auto Service	<input type="checkbox"/> Decorator	<input type="checkbox"/> Health Food	<input type="checkbox"/> Parking	<input type="checkbox"/> Utility
<input type="checkbox"/> Auto Stereo/Alarm	<input type="checkbox"/> Deli/Catering	<input type="checkbox"/> Health Services	<input type="checkbox"/> Pet Store	<input type="checkbox"/> Variety
<input type="checkbox"/> Auto Tires	<input type="checkbox"/> Dental	<input type="checkbox"/> Hobby	<input type="checkbox"/> Photographer	<input type="checkbox"/> Video
<input type="checkbox"/> Auto Wrecking	<input type="checkbox"/> Distribution	<input type="checkbox"/> Home Cleaner	<input type="checkbox"/> Pizza	<input type="checkbox"/> Wallpaper
<input type="checkbox"/> Bakery	<input type="checkbox"/> Doughnut	<input type="checkbox"/> Hospitality	<input type="checkbox"/> Printing	<input type="checkbox"/> Warehouse
<input type="checkbox"/> Bar/Tavern/Lounge	<input type="checkbox"/> Drugstore	<input type="checkbox"/> Hotel/Motel	<input type="checkbox"/> Professional Service	<input type="checkbox"/> Wholesale
<input type="checkbox"/> Barber/Beauty	<input type="checkbox"/> Dry Cleaner	<input type="checkbox"/> Ice Cream/Frozen Yogurt	<input type="checkbox"/> Professional/Office	
<input type="checkbox"/> Bed & Breakfast	<input type="checkbox"/> Education/School	<input type="checkbox"/> Industrial	<input type="checkbox"/> Real Estate	
<input type="checkbox"/> Books/Cards/Stationary	<input type="checkbox"/> Electronics	<input type="checkbox"/> Jewelry	<input type="checkbox"/> Recreation	

Year Built: _____ Year Built Source: Appraiser Builder Other See Remarks
 Assessor Estimated Public Records Seller

Business Opportunity

Greater Southern MLS Data Listing Input Form

Required fields are denoted with a red asterisk (*) and conditionally required fields are denoted with a double red asterisk (**).

Basic Information (continued):

Leasable Area Units: <input type="checkbox"/> Square Feet <input type="checkbox"/> Square Meters		*Year Established:	Building Name:		
Total Area (sf):	Living Area Source: <input type="checkbox"/> Appraiser <input type="checkbox"/> Assessor <input type="checkbox"/> Estimated <input type="checkbox"/> Other <input type="checkbox"/> Public Records				
Business Name:			Zoning:		
Minimum Down Amount:		Lot Size Area:	Lot Size Units: <input type="checkbox"/> Acres <input type="checkbox"/> Square Feet		
Lot Dimensions Source: <input type="checkbox"/> Appraiser <input type="checkbox"/> Assessor <input type="checkbox"/> Builder		<input type="checkbox"/> Estimated <input type="checkbox"/> GIS Calculated <input type="checkbox"/> Not Taped	<input type="checkbox"/> Other <input type="checkbox"/> Owner <input type="checkbox"/> Plans	<input type="checkbox"/> Public Records <input type="checkbox"/> See Remarks <input type="checkbox"/> Seller	<input type="checkbox"/> Survey <input type="checkbox"/> Taped
Listing Terms:					
<input type="checkbox"/> 1031 Exchange	<input type="checkbox"/> FHA	<input type="checkbox"/> Lease Option	<input type="checkbox"/> Private Financing Available	<input type="checkbox"/> Trust Conveyance	
<input type="checkbox"/> Cash	<input type="checkbox"/> FHA 203(b)	<input type="checkbox"/> Lien Release	<input type="checkbox"/> Relocation Property	<input type="checkbox"/> Trust Deed	
<input type="checkbox"/> Cash To Existing Loan	<input type="checkbox"/> FHA 203(k)	<input type="checkbox"/> Non-Smoking Premises	<input type="checkbox"/> Subject To Court	<input type="checkbox"/> USDA Loan	
<input type="checkbox"/> Cash to New Loan	<input type="checkbox"/> Freddie Mac	<input type="checkbox"/> Owner May Carry	<input type="checkbox"/> Subject To Other	<input type="checkbox"/> VA Loan	
<input type="checkbox"/> Contract	<input type="checkbox"/> Government Loan	<input type="checkbox"/> Owner Pay Points	<input type="checkbox"/> Submit	<input type="checkbox"/> VA No Loan	
<input type="checkbox"/> Conventional	<input type="checkbox"/> Land Use Fee	<input type="checkbox"/> Owner Survey	<input type="checkbox"/> Subordinate	<input type="checkbox"/> VA No No Loan	
<input type="checkbox"/> Fannie Mae	<input type="checkbox"/> Lease Back	<input type="checkbox"/> Owner Will Carry	<input type="checkbox"/> Trade		

Description

Public Remarks:

The Public Remarks may only contain a description of the property, its features, its location or community, specific terms to or exclusions from a sale (or lease). All text must be entered in the English language ONLY. The following are NOT allowed to appear in the property description: Gate/Alarm Codes, Lockbox Combo, FSBO, Vacant, Occupied, Open House Information, Showing Instructions, Email Addresses, Website Addresses, Phone Numbers, Agent, Assistant, Co-Lister or Owner Names, or any language that violates Fair Housing/HUD Guidelines.

Exclusions:

Inclusions:

Business URL:

Business URL Description:

Virtual Tour URL Unbranded (NO Agent/Broker Information):

The Virtual Tour Field shall contain ONLY a live link to a Virtual Tour of the property. The Virtual Tour may not include such things as: agent/broker photos, agent/broker names, phone numbers, web site addresses, email addresses or advertising other than about the property. No messages or solicitations of any kind. Begin your URL with HTTP:// or HTTPS://. For example http://www.virtualtoursite.com/etc.

Syndication Remarks & Branded Virtual Tour:

Syndication Remarks:

Syndication Remarks may contain information intended specifically for the consumers; this includes contact and other non-confidential information. Syndication Remarks is used in place of the Property Description for syndication display. If left blank during input, syndication websites will continue to receive the text you place in the "Property Description" field.

Virtual Tour URL Branded (Agent/Broker Information):

This Virtual Tour may include Agent/Office branding and will only be used in our Syndication data feeds. Begin your URL with HTTP:// or HTTPS://. For example http://www.virtualtoursite.com/etc.

Business Opportunity

Greater Southern MLS Data Listing Input Form

Required fields are denoted with a red asterisk (*) and conditionally required fields are denoted with a double red asterisk (**).

Business Details

Business Information:

Building Features: <input type="checkbox"/> Elevators <input type="checkbox"/> Living Quarters <input type="checkbox"/> Phone System <input type="checkbox"/> Rec Room <input type="checkbox"/> TV System	Special Licenses: <input type="checkbox"/> Beer/Wine <input type="checkbox"/> Class H <input type="checkbox"/> Gambling <input type="checkbox"/> None <input type="checkbox"/> Other <input type="checkbox"/> Professional	Hours/Days of Operation: <input type="checkbox"/> Evenings Only <input type="checkbox"/> Open -8 Hours/Day <input type="checkbox"/> Open 24 Hours <input type="checkbox"/> Open 7 Days <input type="checkbox"/> Open 8 Hours/Day <input type="checkbox"/> Open 8+ Hours/Day <input type="checkbox"/> Open Monday-Friday <input type="checkbox"/> Open Saturday <input type="checkbox"/> Open Sunday
---	---	---

*# of Full Time Employees:	Reason For Selling:
-----------------------------------	----------------------------

Inventory Value:	*# of Part Time Employees:	Equipment Value:
-------------------------	-----------------------------------	-------------------------

*Ownership Type: <input type="checkbox"/> Corporation <input type="checkbox"/> Franchise <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor
--

Parking Total:	Seating Capacity:	Electricity Provided by: <input type="checkbox"/> Beaugard <input type="checkbox"/> Cleco <input type="checkbox"/> Entergy <input type="checkbox"/> Jeff Davis <input type="checkbox"/> Other
-----------------------	--------------------------	--

Years Current Owner:	Hours Owner Works:	Professional Mgmt Expense:
-----------------------------	---------------------------	-----------------------------------

Lease Information:

Total Actual Rent:	Monthly NNN:	Equipment Expense:
---------------------------	---------------------	---------------------------

Lease Expiration:	Lease Assignable? <input type="checkbox"/> Yes <input type="checkbox"/> No	Lease Renewal Option? <input type="checkbox"/> Yes <input type="checkbox"/> No
--------------------------	---	---

Financial Information:

Accounting Type: <input type="checkbox"/> Actual <input type="checkbox"/> ProForma	Gross Operating Income:
---	--------------------------------

Operating Expense:	Net Profit:
---------------------------	--------------------

Office & MLS

Listing Information:

*Dual Variable Compensation? <input type="checkbox"/> Yes <input type="checkbox"/> No
--

*Listing Service: <input type="checkbox"/> Full Service <input type="checkbox"/> Limited Service	Start Showing Date:	Sign on Property? <input type="checkbox"/> Yes <input type="checkbox"/> No
---	----------------------------	---

*Listing Agreement: <input type="checkbox"/> Exclusive Right To Sell <input type="checkbox"/> Exclusive Right With Exception <input type="checkbox"/> Open <input type="checkbox"/> Seller Reserved
--

Contact Information:

*Showing Contact Type: <input type="checkbox"/> Agent <input type="checkbox"/> None <input type="checkbox"/> Occupant <input type="checkbox"/> Other <input type="checkbox"/> Owner <input type="checkbox"/> Property Manager <input type="checkbox"/> See Remarks

Showing Contact Name:	Showing Contact Phone:	Ext:
------------------------------	-------------------------------	-------------

Occupant Information:

*Occupant Type: <input type="checkbox"/> Owner <input type="checkbox"/> Tenant <input type="checkbox"/> Vacant	Owner Name:
---	--------------------

Owner Phone:

Showing Information:

*Showing Instructions:

*Lock Box Location:

Key Safe Description: <input type="checkbox"/> Call Listing Office <input type="checkbox"/> Combo <input type="checkbox"/> Multacc <input type="checkbox"/> None <input type="checkbox"/> Risco <input type="checkbox"/> See Remarks <input type="checkbox"/> Seller Providing Access <input type="checkbox"/> SentiLock <input type="checkbox"/> Supra
--

Lock Box Version: <input type="checkbox"/> Supra <input type="checkbox"/> Supra BT <input type="checkbox"/> Supra BT LE	Lock Box Serial Number:
--	--------------------------------

Showing Requirements:

<input type="checkbox"/> 24 Hour Notice	<input type="checkbox"/> Call Owner	<input type="checkbox"/> Email Listing Agent	<input type="checkbox"/> Occupied	<input type="checkbox"/> Showing Service
<input type="checkbox"/> Appointment Only	<input type="checkbox"/> Call Tenant	<input type="checkbox"/> Key In Office	<input type="checkbox"/> Pet(s) on Premises	<input type="checkbox"/> Text Listing Agent
<input type="checkbox"/> Call Listing Agent	<input type="checkbox"/> Combination Lock Box	<input type="checkbox"/> Lockbox	<input type="checkbox"/> Restricted Hours	<input type="checkbox"/> To Be Built
<input type="checkbox"/> Call Listing Office	<input type="checkbox"/> Day Sleeper	<input type="checkbox"/> No Lockbox	<input type="checkbox"/> Security System	<input type="checkbox"/> Under Construction
<input type="checkbox"/> Call Manager	<input type="checkbox"/> Do Not Show	<input type="checkbox"/> No Sign	<input type="checkbox"/> See Remarks	

Contact Information:

Other Phone Description:	Other Phone Number:	Ext:
---------------------------------	----------------------------	-------------

*Preferred Order of Contact — Select up to 6 contact options using the numbers 1 to 6 to specify the order.
--

<input type="checkbox"/> Agent Cell Ph	<input type="checkbox"/> Agent Pager Ph	<input type="checkbox"/> Co-Agent Direct Ph	<input type="checkbox"/> Co-Agent Text Message	<input type="checkbox"/> Office Ph
<input type="checkbox"/> Agent Direct Ph	<input type="checkbox"/> Agent Text Message	<input type="checkbox"/> Co-Agent Email	<input type="checkbox"/> Co-Agent Toll Free	<input type="checkbox"/> Other
<input type="checkbox"/> Agent Email	<input type="checkbox"/> Agent Toll Free	<input type="checkbox"/> Co-Agent Fax	<input type="checkbox"/> Co-Agent Voice Mail	
<input type="checkbox"/> Agent Fax	<input type="checkbox"/> Agent Voice Mail	<input type="checkbox"/> Co-Agent Home Ph	<input type="checkbox"/> Offers Email	
<input type="checkbox"/> Agent Home Ph	<input type="checkbox"/> Co-Agent Cell Ph	<input type="checkbox"/> Co-Agent Pager Ph	<input type="checkbox"/> Office Fax	

Required fields are denoted with a red asterisk (*) and conditionally required fields are denoted with a double red asterisk (**).

Office & MLS (continued)

Private Remarks:

MLS:

Ad Number:

Before selecting "No" on any of the below options written authorization from the seller is required.

*Internet Entire Listing Display? Yes No

*Internet Address Display? Yes No

*Internet Consumer Comment? Yes No

*Internet Automated Valuation Display? Yes No

*Neighborhood Market Report Seller Participant? Yes No

Agent Information:

*List Agent MLS ID:

Co-List Agent MLS ID:

List Team ID:

Co-List Team ID:

Offers Email:

*List Agent Email Confidential:

Photographer MLS ID:

State License - Listing Agent

Listing Agent information:

List Agent:

List Agent State License Number:

Co-Listing Agent information:

Co-List Agent:

Co-List Agent State License Number:

Signatures

*Agent Signature:

Date:

*Sellers Signature:

Date:

*Broker/Participant's Signature:

Date:

*Sellers Signature:

Date: