



Office ID* _____ Agent ID _____ Co-Agent ID _____

Reciprocal Agnt Name(Print) _____ Reciprocal List Off. _____

Recp Agnt Phone Number _____ Recip List Off Phone Number _____

Recp Agnt Fax # _____ Recip L/O Fax# _____

Area* _____ County* _____ APN* _____

Street# _____ Direction _____ Street Name _____ Suffix _____ Post ID _____ Unit# _____

City* _____ Zip _____ - _____ Cross Street _____ Map Book* _____ Map Pg* _____

Listing Price* _____ Map Coordinates Top* _____ Side* _____

Agreement Type* _____

Public Viewable Y N

Primary Picture Provided By _____

Commission to S.O. _____

Variable Rate Comm Y N

Comments _____

Bedrms _____ Full Baths _____

3/4 Baths _____ 1/2 Baths _____

1/4 Baths _____

Sizes _____ SqFt

SqFt Source A B E O S T

Lot Size _____

Lot Size Source A B E O S T

Yr Built _____ OR _____

List Date* _____

Exp Date* _____

Occupant Type* _____

Owner Name _____

Owner Phone _____ - _____ - _____

Occ. Name _____

Phone to Show _____ - _____ - _____

Show Instructions (see attached sheet)

Showing Instructions* Appt Only ___ Call List. Off ___ See Remarks ___

Marketing Remarks (see attached sheet)

Agent Only Remarks (see attached sheet)

Dir. To Property (see attached sheet)

Have _____

Form of Ownership
Sole Proprietorship _____
Partnership _____ Corporation _____
S. Corporation _____ Franchise _____

Down\$ _____

Sales \$ _____

Motivation _____

Want _____

Type of Business _____

Terms* All Inclusive Trust ___ Cal Vet Loan ___
Cash ___ CTNL ___
Cash to Existing Ln ___ Contract ___
Exchange ___ Fannie Mae ___ FHA Loan ___ Freddie
Mac ___ Lease Option ___
Ownr May Carry ___ Ownr Will
Carry ___ REO ___
Probate ___ ShortPay ___ Subj To Ln ___
Subj to Court ___ Subj. to
Other ___ Subordinate ___ Submit ___
Trade ___ VA Loan ___ VA No Loan ___
VA No NO Loan ___

Type of Lease* Gross ___ Modified Gross ___
Triple Net ___ Percent ___

Lease Expiration*(Date) _____

Monthly Rent\$ _____

Lease/Sqft\$ _____

Percent Lease _____

Renewal Option _____

Equip Inc in Sp Rent _____

Cont. Lease Equip _____

How Long Established _____

W/ Present Owner _____

Avg.Cust. Count# _____

of Prking Sp # _____

Full Time Employees# _____

#Part Time Employees# _____

Total Employees# _____

Hrs/Wks Owner Wks# _____

Owner Will Train Y N

Days & Hrs Open _____

Storage Facility _____

Water Source District ___ Private ___
Well ___ Other ___

Average Markup _____

Asset - Cash\$ _____

Asset - Inventory\$ _____

Asset Equip\$ _____

Asset Lease
Improve\$ _____

Asset Real Estate\$ _____

Asset - Other\$ _____

Assets Total\$ _____

Liability A/P\$ _____

Liability-
Expenses\$ _____

Liability Long Term\$ _____

Liability Total\$ _____

Retained Earnings\$ _____

Total Rent\$ _____

Utilities\$ _____

Insurance\$ _____

Advertising\$ _____

Accounting\$ _____

Supplies\$ _____

Business Opportunity Pg 2
Telephones\$ _____
Taxes\$ _____
Licenses\$ _____
Equipt. Rent\$ _____
Repairs\$ _____
Payroll\$ _____
Payroll Tax\$ _____
Other Expenses1\$ _____
Other Expenses 2\$ _____
Total Annual Exp\$ _____
Gross Sales\$ _____
Cost of Sales\$ _____

Gross Profit\$ _____
Total Expenses\$ _____
Net Income\$ _____
Owner Salary _____
Manager's Salary _____
Interest _____
Decprciation _____
Fringes _____
Adjusted Net Income\$ _____
Goodwill\$ _____
Equipt.Incl\$ _____
Inventory\$ _____
Lease Value\$ _____

Cov Not to Compete\$ _____
Mgmt Constg Agmnt\$ _____
Total Price Includes\$ _____
Gross Profit\$ _____
Total Expenses\$ _____
Adj. Net Income\$ _____
Principle\$ _____ **Interest** _____
Debt Service\$ _____
Cash Flow\$ _____
Dwn Pymt+Closing Cost\$ _____
ROI _____ %

******Marketing Remarks 1000 Words Max.--Please Type or Print Neatly******

*******Agent Only Remarks 500 Words Max - Please Type or Print Neatly*******

*******Directions to Property 250 Words Max. - Please Type or Print Neatly*******

The information contained above is furnished for the sole benefit of Participants in a Multiple Listing Service. All information is intended as representative but is not guaranteed to be accurate.

Signature

Date

Signature

Date



PASADENA-FOOTHILLS ASSOCIATION OF REALTORS®

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E-mail: admin@pfar.org
www.pfar.org

3608 Foothill Boulevard
La Crescenta, California 91214
(818) 248-0064 Fax (818) 248-0188

LISTING PAYMENT FORM

Listing Address _____ List # _____

Listing Input Fees

Residential	\$ 18.00
Lots & Land	18.00
Residential Inc.	35.00
Commercial	35.00

Listing Change 7.00

Photos 7.00 each Photos may be e-mailed to Janet@pfar.org,
Jessie@pfar.org , or Janis@pfar.org

PHOTOS MUST BE SUBMITTED WITHIN 48 HOURS (MAXIMUM 10 PHOTOS)*
NOTE: IMRMLS & SOUTHLAND REGIONAL (CHRISNET) REQUIRE 1 PHOTO
(THE SIZE RESTRICTION IS 500K FILE SIZE OR LESS IN JPG FILE FORM)

NO LISTNGS WILL BE PROCESSED WITHOUT METHOD OF PAYMENT

Please Print:

Name: _____ Ph# _____

Visa or MasterCard# _____ Exp.Date _____

Signature _____ Agent# _____

***OVER 10 PHOTOS WILL BE \$10.00 EACH**