

MAINE STATEWIDE MLS – MULTI-FAMILY PROPERTY LISTING FORM

® = Required

® Address: _____

® Town: _____

® Zip Code: _____

® County: (check off 1)

- | | |
|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> Androscoggin | <input type="checkbox"/> Oxford |
| <input type="checkbox"/> Aroostook | <input type="checkbox"/> Penobscot |
| <input type="checkbox"/> Cumberland | <input type="checkbox"/> Piscataquis |
| <input type="checkbox"/> Franklin | <input type="checkbox"/> Sagadahoc |
| <input type="checkbox"/> Hancock | <input type="checkbox"/> Somerset |
| <input type="checkbox"/> Kennebec | <input type="checkbox"/> Waldo |
| <input type="checkbox"/> Knox | <input type="checkbox"/> Washington |
| <input type="checkbox"/> Lincoln | <input type="checkbox"/> York |

® Price: \$ _____

Neighborhood: _____

Monthly Assoc. Fee: _____

® Lot Size Acres: _____

Road Frontage: _____

® Surveyed: (check off 1)

- Yes
 No
 Unknown

® Seasonal: (check off 1)

- Yes
 No
 Unknown

® Flood Zone: (check off 1)

- Yes
 No
 Unknown

® Water Frontage: ___ Yes ___ No

Water Frontage Feet: _____

Water Frontage Feet Owned: _____

Water Frontage Feet Shared: _____

Water Body Name: _____

Water Body Type: (check off 1)

- | | | |
|--------------------------------|---------------------------------|---------------------------------|
| <input type="checkbox"/> Bay | <input type="checkbox"/> Harbor | <input type="checkbox"/> Pond |
| <input type="checkbox"/> Brook | <input type="checkbox"/> Lake | <input type="checkbox"/> River |
| <input type="checkbox"/> Cove | <input type="checkbox"/> Ocean | <input type="checkbox"/> Stream |

® Book: _____

® Page: _____

® Map: _____

® Lot: _____

® Taxes: _____

® Tax Year: _____

® Zoning: _____

Exterior Color: _____

® Year Built: _____

Foundation Size: _____

® Living Area Above Grade: _____

® Living Area Below Grade: _____

Source of Living Area: (check off 1)

- Appraisal
 Builder
 Measured
 Other
 Public Record
 Owner

® Number of Units: _____

® Number of Stories: _____

MAINE STATEWIDE MLS - MULTI-FAMILY PROPERTY LISTING FORM (page 2)

® = Required

® # of 1 Bedroom Units: _____

® # of 2 Bedroom Units: _____

® # of 3+ Bedroom Units: _____

® Total Full Baths: _____

Total Partial Baths: _____

of Heating Units: _____

of Water Heaters: _____

Gross Annual Income: _____

Gross Annual Expenses: _____

Security Deposit: _____

Owner Occupied: ___ Yes ___ No

Unit 2 Description

Level: ___ B ___ 1 ___ 2 ___ 3 ___ 4+

of Rooms: ___ # of Bedrooms: ___

of Full Baths: ___ # of Partial Baths: ___

Monthly Rent: _____

Lease: ___ Yes ___ No

Security: ___ Yes ___ No

Included in Rent:

Heat: ___ Yes ___ No

Electric: ___ Yes ___ No

Water: ___ Yes ___ No

Sewer: ___ Yes ___ No

Range: ___ Yes ___ No

Refrigerator: ___ Yes ___ No

Unit 1 Description

Level: ___ B ___ 1 ___ 2 ___ 3 ___ 4+

of Rooms: ___ # of Bedrooms: ___

of Full Baths: ___ # of Partial Baths: ___

Monthly Rent: _____

Lease: ___ Yes ___ No

Security: ___ Yes ___ No

Included in Rent:

Heat: ___ Yes ___ No

Electric: ___ Yes ___ No

Water: ___ Yes ___ No

Sewer: ___ Yes ___ No

Range: ___ Yes ___ No

Refrigerator: ___ Yes ___ No

Unit 3 Description

Level: ___ B ___ 1 ___ 2 ___ 3 ___ 4+

of Rooms: ___ # of Bedrooms: ___

of Full Baths: ___ # of Partial Baths: ___

Monthly Rent: _____

Lease: ___ Yes ___ No

Security: ___ Yes ___ No

Included in Rent:

Heat: ___ Yes ___ No

Electric: ___ Yes ___ No

Water: ___ Yes ___ No

Sewer: ___ Yes ___ No

Range: ___ Yes ___ No

Refrigerator: ___ Yes ___ No

MAINE STATEWIDE MLS - MULTI-FAMILY PROPERTY LISTING FORM (page 3)

® = Required

Unit 4 Description

Level: ___ B ___ 1 ___ 2 ___ 3 ___ 4+

of Rooms: ___ # of Bedrooms: ___

of Full Baths: ___ # of Partial Baths: ___

Monthly Rent: _____

Lease: ___ Yes ___ No

Security: ___ Yes ___ No

Included in Rent:

Heat: ___ Yes ___ No

Electric: ___ Yes ___ No

Water: ___ Yes ___ No

Sewer: ___ Yes ___ No

Range: ___ Yes ___ No

Refrigerator: ___ Yes ___ No

Unit 6 Description

Level: ___ B ___ 1 ___ 2 ___ 3 ___ 4+

of Rooms: ___ # of Bedrooms: ___

of Full Baths: ___ # of Partial Baths: ___

Monthly Rent: _____

Lease: ___ Yes ___ No

Security: ___ Yes ___ No

Included in Rent:

Heat: ___ Yes ___ No

Electric: ___ Yes ___ No

Water: ___ Yes ___ No

Sewer: ___ Yes ___ No

Range: ___ Yes ___ No

Refrigerator: ___ Yes ___ No

Unit 5 Description

Level: ___ B ___ 1 ___ 2 ___ 3 ___ 4+

of Rooms: ___ # of Bedrooms: ___

of Full Baths: ___ # of Partial Baths: ___

Monthly Rent: _____

Lease: ___ Yes ___ No

Security: ___ Yes ___ No

Included in Rent:

Heat: ___ Yes ___ No

Electric: ___ Yes ___ No

Water: ___ Yes ___ No

Sewer: ___ Yes ___ No

Range: ___ Yes ___ No

Refrigerator: ___ Yes ___ No

® Site: (check off up to 15)

- ___ Other
- ___ Agricultural
- ___ Corner Lot
- ___ Cul-de-sac
- ___ Ground Lease
- ___ Harvestable Crops
- ___ Level
- ___ Open
- ___ Pasture/Field
- ___ Right of Way
- ___ Rolling/Sloping
- ___ Scenic View
- ___ Sidewalks
- ___ Well Landscaped
- ___ Wooded

® Driveway: (check off up to 4)

- ___ No Driveway
- ___ Other Driveway
- ___ Gravel
- ___ Concrete
- ___ Common
- ___ Paved

® Location: (check off up to 10)

- ___ Other
- ___ Abuts Conservation
- ___ Business District
- ___ Historic District
- ___ Industrial Lot
- ___ Interior Lot
- ___ Intown
- ___ Near Country Club
- ___ Near Shopping
- ___ Neighborhood
- ___ Office Park
- ___ Retail Strip
- ___ Rural
- ___ Shopping Mall
- ___ Ski Resort
- ___ Subdivision
- ___ Suburban

MAINE STATEWIDE MLS - MULTI-FAMILY PROPERTY LISTING FORM (page 4)

® = Required

® Uses: (check off up to 9)

- | | |
|--|---|
| <input type="checkbox"/> Other | <input type="checkbox"/> Mobile Homes Allowed |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Recreational |
| <input type="checkbox"/> Developmental Potential | |
| <input type="checkbox"/> Industrial | <input type="checkbox"/> Residential |
| <input type="checkbox"/> Mixed Use | <input type="checkbox"/> Timberland |

® Roads: (check off up to 8)

- | | |
|--------------------------------------|--|
| <input type="checkbox"/> Other | <input type="checkbox"/> Paved Private |
| <input type="checkbox"/> Association | <input type="checkbox"/> Public |
| <input type="checkbox"/> Dead End | <input type="checkbox"/> Right of Way |
| <input type="checkbox"/> Gravel/Dirt | <input type="checkbox"/> Seasonal |
| <input type="checkbox"/> Paved | |

® Electric: (check off up to 10)

- | | |
|---|---|
| <input type="checkbox"/> No Electric | <input type="checkbox"/> Circuit Breakers |
| <input type="checkbox"/> Other Electric | <input type="checkbox"/> Combination |
| <input type="checkbox"/> 110 Volts | <input type="checkbox"/> Fuses |
| <input type="checkbox"/> 220 Volts | <input type="checkbox"/> On Site |
| <input type="checkbox"/> 440 Volts | <input type="checkbox"/> Three Phase |
| <input type="checkbox"/> At Street | <input type="checkbox"/> Underground |

® Gas: (check off up to 5)

- | | |
|------------------------------------|--|
| <input type="checkbox"/> No Gas | <input type="checkbox"/> Natural – At Street |
| <input type="checkbox"/> Other Gas | <input type="checkbox"/> Natural – On Site |
| <input type="checkbox"/> Bottled | <input type="checkbox"/> Underground |

® Sewer: (check off up to 5)

- | | |
|---|--|
| <input type="checkbox"/> No Sewer | <input type="checkbox"/> Septic Design Available |
| <input type="checkbox"/> Other Sewer | <input type="checkbox"/> Septic Existing On Site |
| <input type="checkbox"/> Private | <input type="checkbox"/> Septic Needed On Site |
| <input type="checkbox"/> Public | <input type="checkbox"/> Soil Test Available |
| <input type="checkbox"/> Public At Street | |

® Water: (check off up to 5)

- | | |
|--------------------------------------|--|
| <input type="checkbox"/> No Water | <input type="checkbox"/> Public At Street |
| <input type="checkbox"/> Other Water | <input type="checkbox"/> Seasonal |
| <input type="checkbox"/> Private | <input type="checkbox"/> Well Existing On Site |
| <input type="checkbox"/> Public | <input type="checkbox"/> Well Needed On Site |

® Style: (check off up to 10)

- | | |
|--|--|
| <input type="checkbox"/> Other | <input type="checkbox"/> Greek Revival |
| <input type="checkbox"/> Bed & Breakfast | <input type="checkbox"/> Hi Rise |
| <input type="checkbox"/> Bungalow | <input type="checkbox"/> Multi Level |
| <input type="checkbox"/> Camp | <input type="checkbox"/> New Englander |
| <input type="checkbox"/> Cape | <input type="checkbox"/> Raised Ranch |
| <input type="checkbox"/> Chalet | <input type="checkbox"/> Ranch |
| <input type="checkbox"/> Colonial | <input type="checkbox"/> Rooming House |
| <input type="checkbox"/> Contemporary | <input type="checkbox"/> Row - End |
| <input type="checkbox"/> Cottage | <input type="checkbox"/> Row - Inside |
| <input type="checkbox"/> Double Wide | <input type="checkbox"/> Salt Box |
| <input type="checkbox"/> Duplex | <input type="checkbox"/> Shingle Style |
| <input type="checkbox"/> Farmhouse | <input type="checkbox"/> Single Wide |
| <input type="checkbox"/> Federal | <input type="checkbox"/> Split Entry |
| <input type="checkbox"/> Gambrel | <input type="checkbox"/> Townhouse |
| <input type="checkbox"/> Garden | <input type="checkbox"/> Victorian |
| <input type="checkbox"/> Garrison | |

® Construction: (check off up to 5)

- | | |
|---|--------------------------------------|
| <input type="checkbox"/> Other | <input type="checkbox"/> Post & Beam |
| <input type="checkbox"/> Log | <input type="checkbox"/> Steel Frame |
| <input type="checkbox"/> Masonry | <input type="checkbox"/> To be Built |
| <input type="checkbox"/> Modular Prefab | <input type="checkbox"/> Wood Frame |
| <input type="checkbox"/> New Construction | |

® Basement: (check off up to 10)

- | | |
|--------------------------------------|-------------------------------------|
| <input type="checkbox"/> None | <input type="checkbox"/> Full |
| <input type="checkbox"/> Other | <input type="checkbox"/> Partial |
| <input type="checkbox"/> Bulkhead | <input type="checkbox"/> Slab |
| <input type="checkbox"/> Crawl Space | <input type="checkbox"/> Sump Pump |
| <input type="checkbox"/> Daylight | <input type="checkbox"/> Unfinished |
| <input type="checkbox"/> Dirt | <input type="checkbox"/> Walkout |
| <input type="checkbox"/> Finished | |

® Exterior: (check off up to 10)

- | | |
|--|--|
| <input type="checkbox"/> Other | <input type="checkbox"/> Concrete |
| <input type="checkbox"/> Aluminum Siding | <input type="checkbox"/> Glass |
| <input type="checkbox"/> Asbestos | <input type="checkbox"/> Log Siding |
| <input type="checkbox"/> Asphalt | <input type="checkbox"/> Metal Clad |
| <input type="checkbox"/> Block | <input type="checkbox"/> Shingle |
| <input type="checkbox"/> Brick | <input type="checkbox"/> Stucco |
| <input type="checkbox"/> Brick Veneer | <input type="checkbox"/> Vertical Siding |
| <input type="checkbox"/> Clapboard | <input type="checkbox"/> Vinyl Siding |
| <input type="checkbox"/> Composition | <input type="checkbox"/> Wood Siding |

® = Required

® Roof: (check off up to 8)

- | | |
|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> Other | <input type="checkbox"/> Rolled |
| <input type="checkbox"/> Composition | <input type="checkbox"/> Slate |
| <input type="checkbox"/> Flat | <input type="checkbox"/> Shingle |
| <input type="checkbox"/> Fiberglass | <input type="checkbox"/> Tile |
| <input type="checkbox"/> Membrane | <input type="checkbox"/> Tar & Gravel |
| <input type="checkbox"/> Metal | <input type="checkbox"/> Wood Shingle |
| <input type="checkbox"/> Pitched | |

® Heat System: (check off up to 9)

- | | |
|--|---------------------------------------|
| <input type="checkbox"/> None | <input type="checkbox"/> Heat Pump |
| <input type="checkbox"/> Other | <input type="checkbox"/> Hot Air |
| <input type="checkbox"/> Baseboard | <input type="checkbox"/> Hot Water |
| <input type="checkbox"/> Blowers | <input type="checkbox"/> Multi Zones |
| <input type="checkbox"/> Direct Vent Furnace | <input type="checkbox"/> Radiant |
| <input type="checkbox"/> Direct Vent Heater | <input type="checkbox"/> Space Heater |
| <input type="checkbox"/> Forced | <input type="checkbox"/> Steam |
| <input type="checkbox"/> Geothermal | <input type="checkbox"/> Stove |
| <input type="checkbox"/> Gravity | |

® Heat Fuel: (check off up to 9)

- | | |
|--|--|
| <input type="checkbox"/> None | <input type="checkbox"/> Kerosene |
| <input type="checkbox"/> Other | <input type="checkbox"/> Multi-Fuel System |
| <input type="checkbox"/> Coal | <input type="checkbox"/> Oil |
| <input type="checkbox"/> Electric | <input type="checkbox"/> Propane |
| <input type="checkbox"/> Gas – Bottled | <input type="checkbox"/> Solar |
| <input type="checkbox"/> Gas – Natural | <input type="checkbox"/> Wood |
| <input type="checkbox"/> K-1 | |

® Water Heater: (check off up to 6)

- | | |
|---|---|
| <input type="checkbox"/> Other | <input type="checkbox"/> Rented |
| <input type="checkbox"/> Electric | <input type="checkbox"/> Separate Booster |
| <input type="checkbox"/> Gas | <input type="checkbox"/> Solar |
| <input type="checkbox"/> Off Heating System | |
| <input type="checkbox"/> Oil | <input type="checkbox"/> Tank |

® Cooling: (check off up to 4)

- | | |
|------------------------------------|--------------------------------------|
| <input type="checkbox"/> None | <input type="checkbox"/> Other |
| <input type="checkbox"/> A/C Units | <input type="checkbox"/> Central Air |

® Floors: (check off up to 7)

- | | |
|---|---|
| <input type="checkbox"/> Other | <input type="checkbox"/> Partially Carpeted |
| <input type="checkbox"/> Concrete | <input type="checkbox"/> Tile/Brick |
| <input type="checkbox"/> Fully Carpeted | <input type="checkbox"/> Vinyl |
| <input type="checkbox"/> Heavy Duty | <input type="checkbox"/> Wood |
| <input type="checkbox"/> Metal | |

® Vehicle Storage: (check off up to 11)

- | | |
|---|---|
| <input type="checkbox"/> 1 Car | <input type="checkbox"/> Carport |
| <input type="checkbox"/> 2 Car | <input type="checkbox"/> Detached |
| <input type="checkbox"/> 3 Car | <input type="checkbox"/> Direct Entry to Living |
| <input type="checkbox"/> 3+ Car | <input type="checkbox"/> Garage |
| <input type="checkbox"/> None | <input type="checkbox"/> Heated |
| <input type="checkbox"/> Other | <input type="checkbox"/> Off Street Parking |
| <input type="checkbox"/> Attached | <input type="checkbox"/> Storage Above |
| <input type="checkbox"/> Auto Door Opener | |
| <input type="checkbox"/> Barn | <input type="checkbox"/> Under |

Amenities: (check off up to 20)

- | | |
|--|--|
| <input type="checkbox"/> Other | <input type="checkbox"/> Laundry – 1 st Floor |
| <input type="checkbox"/> 1 st Floor Bed | <input type="checkbox"/> Laundry – Hookup |
| <input type="checkbox"/> Attic | <input type="checkbox"/> Master Bed w/Bath |
| <input type="checkbox"/> Clubhouse | <input type="checkbox"/> Outbuilding |
| <input type="checkbox"/> Deck | <input type="checkbox"/> Pantry |
| <input type="checkbox"/> Elevator – Passenger | <input type="checkbox"/> Patio |
| <input type="checkbox"/> Elevator – Freight | <input type="checkbox"/> Pool – Above Ground |
| <input type="checkbox"/> Escalator – Stairs | <input type="checkbox"/> Pool – In Ground |
| <input type="checkbox"/> Fire System | <input type="checkbox"/> Porch |
| <input type="checkbox"/> Furniture Included | <input type="checkbox"/> Porch – Screened |
| <input type="checkbox"/> Home Warranty | <input type="checkbox"/> Security System |
| <input type="checkbox"/> Hot Tub | <input type="checkbox"/> Sprinkler |
| <input type="checkbox"/> In-Law Apt | <input type="checkbox"/> Storage |
| <input type="checkbox"/> Laundry – Coin | <input type="checkbox"/> Tennis Court |

Accessibility Amenities: (check off up to 9)

- | |
|--|
| <input type="checkbox"/> Other |
| <input type="checkbox"/> 32-36 Inch Doors |
| <input type="checkbox"/> 36+ Inch Doors |
| <input type="checkbox"/> 36-48 Inch Halls |
| <input type="checkbox"/> 48+ Inch Halls |
| <input type="checkbox"/> Elevator/Chair Lift |
| <input type="checkbox"/> Kitchen Modifications |
| <input type="checkbox"/> Level Entry |
| <input type="checkbox"/> Ramped Main Level |
| <input type="checkbox"/> Roll-In Shower |

Equipment: (check off up to 5)

- | |
|---|
| <input type="checkbox"/> Other |
| <input type="checkbox"/> Cable |
| <input type="checkbox"/> Central Vacuum |
| <input type="checkbox"/> Generator |
| <input type="checkbox"/> Satellite Dish |

