

Commercial / Industrial Lease - Input Sheet

Please print clearly. Do not use \$ signs or commas for dollar entries.

COL

List Office ID _____ Area _____ Lease Price \$ _____

Property Type

Agriculture, Apartments, Commercial, Heavy Industrial,
Light Industrial, Office, Other, Retail, Wholesale (Select 1)

TMS# / Parcel ID _____

County Lexington, Richland, Kershaw, Abbeville, Aiken, Calhoun, Fairfield,
Newberry, Orangeburg, Saluda, Sumter, Other (Select 1)

Address _____
Street No Street Dir Street Name Street Type, Ex. Road, Drive, Etc. Unit # / Lot #

City _____ Zip Code _____ - _____

Lot Size _____ Acres _____ . _____

Agent Public ID _____ Agent _____ Agent Phone _____ - _____

Co-Agent Public ID _____ Co-Agent _____ Co-Agent Phone _____ - _____

List Agt Oth Phone - Mobile# (_____) - _____ Fax # (_____) - _____

Agent E-mail _____

List Office Name _____

List Office Phone (_____) - _____ Ext _____ List Office Fax (_____) - _____

SB Comp _____ Transaction Broker Accepted Y/N (circle one) Transaction Broker Comp _____ Variable Commission Y/N (circle one)

Owner Name _____ Owner Phone (_____) - _____

List Date ____/____/____ Exp. Date ____/____/____ Foreclosed Y/N Short Sale Power Y/N
Property (circle one) Y/N On (circle one)
(circle one)

Property Y/N Exempt from Y/N Rollback Tax Y/N/Unk Publish to Internet Y/N
Disclosure (circle one) Property Disclosure (circle one) (circle one) (circle one)

Zoned _____ Gross Heated SqFt _____ Office SqFt _____ Retail SqFt _____ Whse SqFt _____

UpFit / SqFt _____ . _____ Building Attached/Free Standing (circle one) Enterprise Zone _____

Door Height _____ # of Doors _____ Door Height (2) _____ # of Doors (2) _____ Ceiling Height _____ Stories _____ . _____

Year Built _____ New / Resale (circle one) Parking Spaces _____ Occupancy Date ____/____/____

Voltage _____ Amps _____ Phase _____ Land SqFt _____ Road Surface _____

Restrictions _____ Location _____

Services _____ Best Use _____

Contact Name _____ Contact Phone (_____) - _____

Gross Income \$ _____ Total Expenses \$ _____ Net Income \$ _____

Last Appraisal ____/____/____

Verified by the Property Owner/Manager _____ Date _____
Initials

ML# _____

Property Address _____

REMARKS Additional remarks attach separate page. (1500 char max – No Branding, Sales Incentives, Bonuses, or Codes – Must Be Fair Housing Compliant)

Empty text boxes for remarks.

AGENT REMARKS (NON PUBLIC) Attach separate page if necessary. (500 char max)

Empty text boxes for agent remarks.

DIRECTIONS Attach separate page if necessary. (300 char max)

Empty text boxes for directions.

CHECK ALL THAT APPLY

- Use, Construction, Roof, Miscellaneous Building, Sewer, Water, Heating, Cooling, Other Utilities, Fire System, Miscellaneous, Lease Type, Lease Term, Exist Finance, Possession, Showing

Signature of Property Owner/Manager _____ Date _____