

Gulf Coast Multiple Listing Service, Inc.

Instructions: All fields marked ® are required and contain information which must be provided. For features with multiple selections, check the most important.

RES **RESIDENTIAL**
Profile Sheet
Page 1

ML#: _____ **® LIST DATE:** ____/____/____ **® EXPIRATION DATE:** ____/____/____ **® LIST PRICE:** \$ _____ **VRM?** YES

(System Assigned)

-LOCATION INFORMATION-

® NO: _____ **DIR:** _____ **® STREET NAME:** _____ **UNIT:** _____ **® CITY:** _____ **® ST:** _____

STREET NUMBER N _____ S _____ E _____ W _____ **STATE**

® ZIP: _____ **® COUNTY: (1 Req'd)** BAL MOB WASH OTH _____ **® MLS: AREA** _____ **NEAREST INTERSECTING STREET** _____

ZIP CODE _____ **(1-99)** _____

SUBDIVISION _____ **® PARCEL #:** _____

_____ **TAX ASSESSOR MAP BOOK I.D. NUMBER (Req'd only if MOBILE COUNTY)** _____

SCHOOL: See Abbreviation Table

ELEMENTARY _____ **MIDDLE** _____ **HIGH** _____

THE SCHOOL BOARD SHOULD BE CONTACTED FOR THIS INFORMATION-IN MOBILE COUNTY, CALL 221-4257: IN BALDWIN COUNTY CALL 937-0326.

DRIVING DIRECTIONS: _____

LD: _____

LEGAL DESCRIPTION

-AGENT INFORMATION-

® LISTING OFFICE ID: _____

® LISTING AGENT ID: _____ **LISTING AGENT NAME:** _____

CO-LISTING AGENT ID: _____ **CO-LISTING AGENT NAME:** _____

OWNER NAME: _____ **OWNER HOME PHONE:** _____

OWNER WORK PHONE: _____

TENANT NAME: _____ **TENANT HOME PHONE:** _____

TENANT WORK PHONE: _____

OWNER **® OCCUPANT:** TENANT **LOCKBOX LOCATION:** _____ VACANT

® COMMISSION TO OTHER BROKER (BUYER BROKER OR TRANSACTION BROKER) _____ **® COMMISSION TO SUB AGENT:** _____ **INTERNET:** YES NO

-PROPERTY DETAILS-

®

1ST BEDROOM 2ND BEDROOM 3RD BEDROOM 4TH BEDROOM LIVING ROOM KITCHEN FAMILY ROOM

Y/N OFFICE Y/N DINING Y/N BONUS Y/N RECRM Y/N FLORIDA ROOM Y/N LAUNDRY ROOM

