



RESIDENTIAL PROPERTY DATA SECTION (PDS)



*Means Required Information

LOCATION	Street #: <input type="text"/>	Street Dir: <input type="text"/>	*Street Name: <input type="text"/>	St Suffix: <input type="text"/>
	*Town: <input type="text"/>	*Zone: <input type="text"/>	*Zip: <input type="text"/>	
	Sec/Area: <input type="text"/>	Cross St: <input type="text"/>		
	*School District Name: <input type="text"/>			
PRICE & DATES	School District #: <input type="text"/>	District: <input type="text"/>	Section: <input type="text"/>	Block: <input type="text"/>
	Lot: <input type="text"/>	Zoning: <input type="text"/>	Cul-de-sac (Y or N): <input type="checkbox"/>	
	*Waterfront (Y or N): <input type="checkbox"/>	Water Frontage: <input type="text"/>	Waterfront Desc.: <input type="text"/>	*Waterview (Y or N): <input type="checkbox"/>
	Bulkhead (Y or N): <input type="checkbox"/>	Docking Rights: <input type="text"/>	Beach Rights (Y or N): <input type="checkbox"/>	*Adult Community (Y or N): <input type="checkbox"/> Minimum Age: <input type="text"/>
HOME CHARACTERISTICS	*Listing Price: <input type="text"/>	*Taxes (w/o exempt.): <input type="text"/>	Additional Village Taxes: <input type="text"/>	
	*Style: <input type="text"/>	*Rooms: <input type="text"/>	*Bedrooms: <input type="text"/>	*Baths-Full: <input type="text"/> *Baths-Half: <input type="text"/>
	*# Families: <input type="text"/>	*Detached/Att (Det-Att-Sd): <input type="text"/>	*# Kitchens: <input type="text"/>	*Eat In Kitchen (Y or N): <input type="checkbox"/>
	*Dining Room: <input type="text"/>	*Den/Family Rm (Y or N): <input type="checkbox"/>	*Office (Y or N): <input type="checkbox"/>	*Attic (Y or N): <input type="checkbox"/> Handicap Access (Y or N): <input type="checkbox"/>
EXTERIOR	Handicap Access Desc.: <input type="text"/>			
	Approx int Square Footage: <input type="text"/>	*Basement (Crawl-Full-Part-None-Opt): <input type="text"/>	Finished Bsmt (P-Y-N): <input type="checkbox"/>	
	*# Fireplaces: <input type="text"/>	W/W Carpet (Y or N): <input type="checkbox"/>	Wood Floors: (Y or N): <input type="checkbox"/>	*Approx. Year Built: <input type="text"/> *New Construction: (Y or N): <input type="checkbox"/>
	Floor Description: Bsmt/Subfloor: <input type="text"/>	Skylight: <input type="checkbox"/>		
UTILITIES	*1st Floor: <input type="text"/>			
	2nd Floor: <input type="text"/>			
	3rd Floor: <input type="text"/>			
	*Construction: <input type="text"/>	Garage: <input type="text"/>	Garage Type: <input type="text"/>	Driveway (PTY-PVT-N): <input type="text"/>
APPLIANCES	Deck: <input type="text"/>	Patio: <input type="text"/>	Porch: <input type="text"/>	
	*Pool (AG-IG-N): <input type="checkbox"/>	Pool Desc.: <input type="text"/>		
	Inground Lawn Sprinklers: <input type="text"/>	Tennis Court (Y or N): <input type="checkbox"/>	Tennis Court Desc.: <input type="text"/>	
	*Lot Size: <input type="text"/>	*Lot Sq. Footage: <input type="text"/>		
OWNERS/BROKER	Building Size: <input type="text"/>			
	*Stove: <input type="checkbox"/>	*Refrigerator: <input type="checkbox"/>	*Washer: <input type="checkbox"/>	*Dryer: <input type="checkbox"/> *Dishwasher: <input type="checkbox"/>
	*Fuel: <input type="text"/>	*Heat: <input type="text"/>	# Heating Zones: <input type="text"/>	Sewer (Y or N): <input type="checkbox"/> Separate Hot Water Heater: <input type="text"/>
	*A/C (# or CAC): <input type="text"/>	CAC # Zones: <input type="text"/>	Water (Public-Well): <input type="text"/>	
REMARKS	*Owner: <input type="text"/>	*Phone #: <input type="text"/>		
	Occupancy: <input type="text"/>			
	Lockbox (Y or N): <input type="checkbox"/>	Owner Financing (Y or N): <input type="checkbox"/>		
	Remarks: <input type="text"/>			
MISCELLANEOUS	*Directions: <input type="text"/>			
	Property Desc.: <input type="text"/>			
	(No Contact info, Status, etc.)			
	Rent Income: <input type="text"/>	*Also For Rent (Y or N): <input type="checkbox"/>	Rental Price: <input type="text"/>	
SIGNATURES	Renting Broker Compensation: <input type="text"/>			
	Items Excluded In Sale: <input type="text"/>			
		Foreclosure (Y or N): <input type="checkbox"/>		

Owner Signature _____ Owner Signature _____
 Address _____ Email Address _____
 Home Phone _____ Other Phone _____