

Long Term Rental Input Form for Matrix

Required fields in **blue**

General

Property Sub Type & Description

<input type="checkbox"/> Condo	<input type="checkbox"/> Mobile	<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Single Family	<input type="checkbox"/> Townhouse
<input type="checkbox"/> Boat Slip	<input type="checkbox"/> Double	<input type="checkbox"/> Duplex	<input type="checkbox"/> Estate Lot	<input type="checkbox"/> End Unit
<input type="checkbox"/> Condo High-Rise	<input type="checkbox"/> Single	<input type="checkbox"/> Multi-Building	<input type="checkbox"/> Full Size Lot	<input type="checkbox"/> Historic Property Lot
<input type="checkbox"/> Garage	<input type="checkbox"/> Triple	<input type="checkbox"/> Quadplex	<input type="checkbox"/> Historic Property	<input type="checkbox"/> Other
<input type="checkbox"/> Residential	<input type="checkbox"/> Other	<input type="checkbox"/> Tri-plex	<input type="checkbox"/> Patio/Cluster	<input type="checkbox"/> Other

Lease Term

6 Month Month to Month 1 Year Multi-Year Other

Community

<input type="checkbox"/> Airstrip	<input type="checkbox"/> Boat/Camper/Van Parking	<input type="checkbox"/> Park	<input type="checkbox"/> Sidewalks	<input type="checkbox"/> Walk to Shopping
<input type="checkbox"/> Beach Access	<input type="checkbox"/> Gated	<input type="checkbox"/> Paths/Bike-Walk	<input type="checkbox"/> Street Lights	<input type="checkbox"/> None
<input type="checkbox"/> Boat Ramp	<input type="checkbox"/> Lake	<input type="checkbox"/> Security	<input type="checkbox"/> Walk to School	

Street #: _____ **Street Dir:** _____ **Street Name:** _____ **Street Suffix:** _____ **Street Dir Suffix:** _____ **Unit #:** _____

City: _____ **County:** _____ **Zip Code:** _____ **Subdivision:** _____

Seller

<input type="checkbox"/> Bank	<input type="checkbox"/> Court Order	<input type="checkbox"/> Estate	<input type="checkbox"/> Institution	<input type="checkbox"/> Relocation
<input type="checkbox"/> Builder	<input type="checkbox"/> Developer	<input type="checkbox"/> Homeowner/Owner	<input type="checkbox"/> Investor	<input type="checkbox"/> Other
<input type="checkbox"/> Corporate				

Elementary School: _____ **Middle School:** _____ **High School:** _____

Listing Agent/Office

List Agent: _____ **Co-List Agent 1:** _____ **Co-List Agent 2:** _____

Rental

Rental Price: _____ **Rental Payment:** Daily / Weekly / Monthly / Yearly **List Date:** ___/___/___ **Expiration Date:** ___/___/___

Available Date: ___/___/___ **Lease Term Ends:** ___/___/___ **CCR (Covenants, Conditions & Restrictions):** Yes / No

Rental Type

<input type="checkbox"/> Carriage House Apt	<input type="checkbox"/> Entire House	<input type="checkbox"/> Garage Apt	<input type="checkbox"/> Lower Level Apt	<input type="checkbox"/> Mobile Home
<input type="checkbox"/> Efficiency Apt				

Tenant Pays

<input type="checkbox"/> All Maintenance	<input type="checkbox"/> Garbage	<input type="checkbox"/> Pest Control	<input type="checkbox"/> Satellite Dish	<input type="checkbox"/> Water
<input type="checkbox"/> All Utilities	<input type="checkbox"/> Gas	<input type="checkbox"/> Pool	<input type="checkbox"/> Security System	<input type="checkbox"/> Yard
<input type="checkbox"/> Association Fee	<input type="checkbox"/> Internet Connection	<input type="checkbox"/> RV/Boat Parking	<input type="checkbox"/> Sewer	<input type="checkbox"/> Other
<input type="checkbox"/> Cable	<input type="checkbox"/> Landscape Management	<input type="checkbox"/> Sales Tax	<input type="checkbox"/> Telephone	<input type="checkbox"/> None
<input type="checkbox"/> Electric				

Owner Pays

<input type="checkbox"/> All Maintenance	<input type="checkbox"/> Electric w/ Cap	<input type="checkbox"/> Landscape Management	<input type="checkbox"/> Satellite Dish	<input type="checkbox"/> Water
<input type="checkbox"/> All Utilities	<input type="checkbox"/> Garbage	<input type="checkbox"/> Pest Control	<input type="checkbox"/> Security System	<input type="checkbox"/> Yard
<input type="checkbox"/> Association Fee	<input type="checkbox"/> Gas	<input type="checkbox"/> Pool	<input type="checkbox"/> Sewer	<input type="checkbox"/> Other
<input type="checkbox"/> Cable	<input type="checkbox"/> Internet Connection	<input type="checkbox"/> Sales Tax	<input type="checkbox"/> Telephone	<input type="checkbox"/> None
<input type="checkbox"/> Electric				

Occupancy: New/Never Occupied / Previously Occupied **Tenant Occupied:** Yes / No

Prop Mgmt: Yes / No **Prop Mgmt Name:** _____ **Prop Mgmt Phone:** _____

Security Deposit: Yes / No **Security Deposit Amt:** _____ **Pets Allowed:** Yes / No **Pet Size Specs:** _____

Credit Check: Yes / No **Compensation:** Yes / No **Compensation Fee:** _____

Exterior

Garage: Yes / No

Carport: Yes / No

Parking: Yes / No

Assigned Parking: Yes / No

of Garage Spaces: _____

of Carport Spaces: _____

of Parking Spaces: _____

of Assigned Spaces: _____

Parking Description

<input type="checkbox"/> Assigned Spaces	<input type="checkbox"/> Drive Under/Basement	<input type="checkbox"/> Off Street	<input type="checkbox"/> RV/Boat Parking	<input type="checkbox"/> Unpaved
<input type="checkbox"/> Attached	<input type="checkbox"/> Driveway Only	<input type="checkbox"/> Parking Lot	<input type="checkbox"/> Side/Rear Entrance	<input type="checkbox"/> Unpaved Driveway
<input type="checkbox"/> Auto Garage Door	<input type="checkbox"/> Golf Cart Garage	<input type="checkbox"/> Paved	<input type="checkbox"/> Storage Room	<input type="checkbox"/> Other
<input type="checkbox"/> Covered	<input type="checkbox"/> Guest	<input type="checkbox"/> Paved Driveway	<input type="checkbox"/> Street Parking	<input type="checkbox"/> None
<input type="checkbox"/> Detached	<input type="checkbox"/> Kitchen Level Entry			

Dock: Yes / No # of Dock Slips: _____

Dock Slip Description

<input type="checkbox"/> Boat Lift-Covered	<input type="checkbox"/> Boat Slip-Covered	<input type="checkbox"/> Dock Approval Required	<input type="checkbox"/> No Dock Rights	<input type="checkbox"/> Slip Available
<input type="checkbox"/> Boat Lift-Uncovered	<input type="checkbox"/> Boat Slip-Uncovered	<input type="checkbox"/> Dock-Covered	<input type="checkbox"/> Private	<input type="checkbox"/> Slip Fee Required
<input type="checkbox"/> Boat Ramp	<input type="checkbox"/> Community Dock	<input type="checkbox"/> Dock-Uncovered	<input type="checkbox"/> Screened Enclosure	<input type="checkbox"/> Slip No Fee

Pool: Yes / No Hot Tub: Yes / No

Pool/Hot Tub Description

<input type="checkbox"/> Above Ground Pool	<input type="checkbox"/> Heated	<input type="checkbox"/> In-Ground Pool	<input type="checkbox"/> Salt Water System	<input type="checkbox"/> Spa
<input type="checkbox"/> Glass Encl/Inside House	<input type="checkbox"/> Hot Tub	<input type="checkbox"/> Pool House	<input type="checkbox"/> Screen Enclosure	

Exterior House

<input type="checkbox"/> Balcony	<input type="checkbox"/> Deck-Open	<input type="checkbox"/> Outside Shower	<input type="checkbox"/> Porch	<input type="checkbox"/> Sauna/Steam
<input type="checkbox"/> Barbeque Grill	<input type="checkbox"/> Fire Pit	<input type="checkbox"/> Patio-Covered	<input type="checkbox"/> Porch-Front	<input type="checkbox"/> Terrace
<input type="checkbox"/> Columns	<input type="checkbox"/> Gas Grill	<input type="checkbox"/> Patio-Enclosed	<input type="checkbox"/> Porch-Screened	<input type="checkbox"/> TV Antenna
<input type="checkbox"/> Courtyard	<input type="checkbox"/> Hurricane Shutters	<input type="checkbox"/> Patio-Open	<input type="checkbox"/> Porch-Wrap	<input type="checkbox"/> Other
<input type="checkbox"/> Deck	<input type="checkbox"/> Needs Work	<input type="checkbox"/> Patio-Uncovered	<input type="checkbox"/> Renovated	
<input type="checkbox"/> Deck-Covered	<input type="checkbox"/> Newly Painted	<input type="checkbox"/> Pizza Oven	<input type="checkbox"/> Satellite Dish	

Exterior Lot

<input type="checkbox"/> Alley	<input type="checkbox"/> Fenced Yard	<input type="checkbox"/> Irrigation System	<input type="checkbox"/> Sprinkler System	<input type="checkbox"/> Tennis Courts
<input type="checkbox"/> Fenced Lot Partial	<input type="checkbox"/> Garden Area	<input type="checkbox"/> Landscape Lighting	<input type="checkbox"/> Sprinkler System W/Well	<input type="checkbox"/> Well
<input type="checkbox"/> Fenced Lot Total	<input type="checkbox"/> Invisible Fence	<input type="checkbox"/> Security Lighting	<input type="checkbox"/> Swing/Gym Set	<input type="checkbox"/> Other

Fencing

<input type="checkbox"/> Barbed Wire	<input type="checkbox"/> Concrete Block	<input type="checkbox"/> Ornamental Metal	<input type="checkbox"/> Split Rail	<input type="checkbox"/> Wood
<input type="checkbox"/> Brick	<input type="checkbox"/> Cross	<input type="checkbox"/> Picket	<input type="checkbox"/> Stone	<input type="checkbox"/> Wrought Iron
<input type="checkbox"/> Chain Link	<input type="checkbox"/> Electric	<input type="checkbox"/> Post and Rail	<input type="checkbox"/> Vinyl (PVC)	
<input type="checkbox"/> Concrete	<input type="checkbox"/> Invisible	<input type="checkbox"/> Privacy	<input type="checkbox"/> Wire Mesh	

Other Structures

<input type="checkbox"/> Barn	<input type="checkbox"/> Gazebo	<input type="checkbox"/> Out Building	<input type="checkbox"/> Pond House	<input type="checkbox"/> Storage Building
<input type="checkbox"/> Cabana	<input type="checkbox"/> Greenhouse	<input type="checkbox"/> Pavilion	<input type="checkbox"/> Shed	<input type="checkbox"/> Workshop
<input type="checkbox"/> Detached Garage	<input type="checkbox"/> Guest House/Cottage	<input type="checkbox"/> Play House	<input type="checkbox"/> Stable	<input type="checkbox"/> Other

Structure

Bedrooms: _____

Building Stories: _____

Total # of Buildings: _____

Unit Floor: _____

Full Baths: _____

Bedrooms Downstairs: _____

SqFt Total: _____

Approx Year Built: _____

Half Baths: _____

Bedrooms Upstairs: _____

SqFt Source: _____

Pre-1978: Yes / No

Total Rooms: _____

Building Name: _____

Unit Stories: _____

New Construction: Yes / No

New Construction Description

<input type="checkbox"/> Alley	<input type="checkbox"/> Fenced Yard	<input type="checkbox"/> Irrigation System	<input type="checkbox"/> Sprinkler System	<input type="checkbox"/> Tennis Courts
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Building Permit Number: _____

Build to Suit: Yes / No

Builder Model: _____

Builder Name: _____

Style

<input type="checkbox"/> A-Frame	<input type="checkbox"/> Contemporary	<input type="checkbox"/> Loft	<input type="checkbox"/> Ranch	<input type="checkbox"/> Tudor
<input type="checkbox"/> Beach Cottage	<input type="checkbox"/> Country/Rustic	<input type="checkbox"/> Log Cabin	<input type="checkbox"/> Salt Box	<input type="checkbox"/> Victorian
<input type="checkbox"/> Bungalow	<input type="checkbox"/> Craftsman	<input type="checkbox"/> Low Country	<input type="checkbox"/> Spanish	<input type="checkbox"/> Villa
<input type="checkbox"/> Cabin	<input type="checkbox"/> European	<input type="checkbox"/> Mansard	<input type="checkbox"/> Split Level	<input type="checkbox"/> Warehouse
<input type="checkbox"/> Cape Cod	<input type="checkbox"/> Flat	<input type="checkbox"/> Patio Home	<input type="checkbox"/> Townhome	<input type="checkbox"/> Other
<input type="checkbox"/> Colonial	<input type="checkbox"/> French Provincial	<input type="checkbox"/> Plantation	<input type="checkbox"/> Traditional	

Construction/Siding

- | | | | | |
|---|--|--|--------------------------------------|---|
| <input type="checkbox"/> Aluminum | <input type="checkbox"/> Cinder Block | <input type="checkbox"/> GP/LP Siding | <input type="checkbox"/> Shake | <input type="checkbox"/> Stucco-Hard Coat |
| <input type="checkbox"/> Asbestos | <input type="checkbox"/> Composite | <input type="checkbox"/> HardiePlank | <input type="checkbox"/> Shell | <input type="checkbox"/> Stucco-unk |
| <input type="checkbox"/> Block | <input type="checkbox"/> Concrete | <input type="checkbox"/> Log | <input type="checkbox"/> Steel | <input type="checkbox"/> Tabby |
| <input type="checkbox"/> Board & Batten | <input type="checkbox"/> Concrete Siding | <input type="checkbox"/> Masonite | <input type="checkbox"/> Stone | <input type="checkbox"/> Vinyl |
| <input type="checkbox"/> Brick | <input type="checkbox"/> Cypress | <input type="checkbox"/> Metal | <input type="checkbox"/> Stone/Frame | <input type="checkbox"/> Wood |
| <input type="checkbox"/> Brick Siding | <input type="checkbox"/> Dryvit | <input type="checkbox"/> Pressboard Siding | <input type="checkbox"/> Stucco | <input type="checkbox"/> Other |
| <input type="checkbox"/> Cedar | <input type="checkbox"/> Frame | <input type="checkbox"/> Rough-Sawn Siding | <input type="checkbox"/> Stucco-Eifs | <input type="checkbox"/> |

Structure Condition

- | | | | | |
|-------------------------------------|---|------------------------------------|---|-------------------------------------|
| <input type="checkbox"/> Boarded-Up | <input type="checkbox"/> Cosmetic Repairs | <input type="checkbox"/> Renovated | <input type="checkbox"/> Structural Repairs | <input type="checkbox"/> Unrestored |
| <input type="checkbox"/> Condemned | <input type="checkbox"/> No Power | <input type="checkbox"/> Restored | <input type="checkbox"/> Tax Incentives | <input type="checkbox"/> Updated |

Foundation

- | | | | | |
|-----------------------------------|--------------------------------------|--|-----------------------------------|--------------------------------|
| <input type="checkbox"/> Basement | <input type="checkbox"/> Built-Up | <input type="checkbox"/> Joists | <input type="checkbox"/> Slab | <input type="checkbox"/> Wood |
| <input type="checkbox"/> Block | <input type="checkbox"/> Concrete | <input type="checkbox"/> Piers/Pilings | <input type="checkbox"/> Steel | <input type="checkbox"/> Other |
| <input type="checkbox"/> Brick | <input type="checkbox"/> Crawl Space | <input type="checkbox"/> Raised Slab | <input type="checkbox"/> Subfloor | <input type="checkbox"/> None |

Property Attached: Yes / No

Common Walls

- | | | | | |
|---|---|---------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> 1 Common Wall | <input type="checkbox"/> 3 Common Walls | <input type="checkbox"/> No One Above | <input type="checkbox"/> No One Below | <input type="checkbox"/> No Common Walls |
| <input type="checkbox"/> 2 Common Walls | | | | |

Roof

- | | | | | |
|--------------------------------------|-----------------------------------|--|--|---------------------------------------|
| <input type="checkbox"/> Asbestos | <input type="checkbox"/> Concrete | <input type="checkbox"/> Membrane | <input type="checkbox"/> Shake | <input type="checkbox"/> Tile |
| <input type="checkbox"/> Asphalt | <input type="checkbox"/> Copper | <input type="checkbox"/> Metal/Steel | <input type="checkbox"/> Slate | <input type="checkbox"/> Tin |
| <input type="checkbox"/> Built-Up | <input type="checkbox"/> Flat | <input type="checkbox"/> Pitched | <input type="checkbox"/> Solar Shingle | <input type="checkbox"/> Wood Shingle |
| <input type="checkbox"/> Composition | <input type="checkbox"/> Foam | <input type="checkbox"/> Rolled Rubber | <input type="checkbox"/> Tar/Gravel | <input type="checkbox"/> Other |

Energy Features

- | | | | | |
|--|---|--|---|--|
| <input type="checkbox"/> Attic Fan | <input type="checkbox"/> Geothermal | <input type="checkbox"/> LEED | <input type="checkbox"/> Ridge Vents | <input type="checkbox"/> Spray Foam |
| <input type="checkbox"/> Double Pane Windows | <input type="checkbox"/> Good Cents | <input type="checkbox"/> NAHB Green | <input type="checkbox"/> Roof Turbines | <input type="checkbox"/> Storm Doors |
| <input type="checkbox"/> Double Pane/Thermo | <input type="checkbox"/> Instant Heat | <input type="checkbox"/> Power Vent | <input type="checkbox"/> Roof Vent Fans | <input type="checkbox"/> Storm Windows |
| <input type="checkbox"/> Electric Air Filter | <input type="checkbox"/> Insulated Doors | <input type="checkbox"/> Programmable Thermostat | <input type="checkbox"/> Smart Thermostat | <input type="checkbox"/> Other |
| <input type="checkbox"/> Energy Star | <input type="checkbox"/> Insulated Floors | <input type="checkbox"/> Recovery System | <input type="checkbox"/> Solar Screens | <input type="checkbox"/> None |
| <input type="checkbox"/> Extra Insulation | <input type="checkbox"/> Insulation | | | |

ADA Features: Yes / No

- | | | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|-------------------------------------|--------------------------------|
| <input type="checkbox"/> 30' Doors | <input type="checkbox"/> Levered | <input type="checkbox"/> No Steps | <input type="checkbox"/> Showers | <input type="checkbox"/> Other |
| <input type="checkbox"/> Big Bath | <input type="checkbox"/> Low Counters | <input type="checkbox"/> Ramp Access | <input type="checkbox"/> Wide Halls | <input type="checkbox"/> None |
| <input type="checkbox"/> High Garage | <input type="checkbox"/> Low Switches | | | |

Rooms (Visit <http://forms.mygiar.com> for the entire Rooms form.)

Room Type: _____ Room Level: _____ Room Length: _____ Room Width: _____

Room Flooring: _____ Room Features: _____ Additional Room Features: _____

Bed Sizes

- | | | | | |
|------------------------------------|--------------------------------|--|-----------------------------------|--------------------------------|
| <input type="checkbox"/> Twin | <input type="checkbox"/> Full | <input type="checkbox"/> King | <input type="checkbox"/> Bunk Bed | <input type="checkbox"/> Other |
| <input type="checkbox"/> Two Twins | <input type="checkbox"/> Queen | <input type="checkbox"/> California King | | |

Interior

Appliances

- | | | | | |
|---|--|--|--|--|
| <input type="checkbox"/> Ceiling Fans | <input type="checkbox"/> Freezer | <input type="checkbox"/> Microwave | <input type="checkbox"/> Range | <input type="checkbox"/> Washer |
| <input type="checkbox"/> Central Vacuum | <input type="checkbox"/> Hood Fan | <input type="checkbox"/> Oven - Cont Clean | <input type="checkbox"/> Range Hood | <input type="checkbox"/> Water Softener |
| <input type="checkbox"/> Commercial Grade | <input type="checkbox"/> Ice Maker Cnctn | <input type="checkbox"/> Oven - Double | <input type="checkbox"/> Range/Oven | <input type="checkbox"/> Wine Chiller |
| <input type="checkbox"/> Convection Oven | <input type="checkbox"/> Ice Maker Machine | <input type="checkbox"/> Oven - Self-Clean | <input type="checkbox"/> Refrigerator | <input type="checkbox"/> Other-See Remarks |
| <input type="checkbox"/> Cooktop-Separate | <input type="checkbox"/> Indoor Grill | <input type="checkbox"/> Oven - Single | <input type="checkbox"/> Smoke Detector | <input type="checkbox"/> None |
| <input type="checkbox"/> Dishwasher | <input type="checkbox"/> Instant Hot Water | <input type="checkbox"/> Oven - Wall | <input type="checkbox"/> Trash Compactor | <input type="checkbox"/> Elevator Ready |
| <input type="checkbox"/> Disposal | <input type="checkbox"/> Intercom | <input type="checkbox"/> Oven - Warmer | <input type="checkbox"/> W/D Stack | <input type="checkbox"/> Security System |
| <input type="checkbox"/> Dryer | <input type="checkbox"/> Jennaire | | | |

Attic

- | | | | | |
|--|------------------------------------|----------------------------------|--------------------------------|-------------------------------|
| <input type="checkbox"/> Floored | <input type="checkbox"/> Pull Down | <input type="checkbox"/> Stairs | <input type="checkbox"/> Other | <input type="checkbox"/> None |
| <input type="checkbox"/> Partial Floored | <input type="checkbox"/> Scuttle | <input type="checkbox"/> Walk-In | | |

Basement: Yes / No

Basement Description: Finished / Unfinished / Other-See Remarks

of Fireplaces: _____

Fireplace Features

<input type="checkbox"/> Electric	<input type="checkbox"/> Gas	<input type="checkbox"/> Masonry	<input type="checkbox"/> Stone	<input type="checkbox"/> Wood Burning
<input type="checkbox"/> Factory Built	<input type="checkbox"/> Gas Logs	<input type="checkbox"/> Non-Working	<input type="checkbox"/> Ventless	<input type="checkbox"/> Wood Stove
<input type="checkbox"/> Free-Standing	<input type="checkbox"/> Gas Starter	<input type="checkbox"/> See-Thru		

Fireplace Location

<input type="checkbox"/> Den/Family Room	<input type="checkbox"/> Great Room	<input type="checkbox"/> Living Room	<input type="checkbox"/> Master Bedroom	<input type="checkbox"/> Study
<input type="checkbox"/> Dining Room	<input type="checkbox"/> Kitchen	<input type="checkbox"/> Master Bath	<input type="checkbox"/> Porch	<input type="checkbox"/> Other

Floors

<input type="checkbox"/> Brick	<input type="checkbox"/> Hardwood	<input type="checkbox"/> Slate	<input type="checkbox"/> Vinyl	<input type="checkbox"/> Wood
<input type="checkbox"/> Carpet	<input type="checkbox"/> Marble	<input type="checkbox"/> Terrazzo	<input type="checkbox"/> Wall to Wall Carpet	<input type="checkbox"/> Other
<input type="checkbox"/> Concrete	<input type="checkbox"/> Parquet	<input type="checkbox"/> Tile		

Interior Features

<input type="checkbox"/> Additional Bedroom Suite	<input type="checkbox"/> Converted Garage	<input type="checkbox"/> Furnished: All	<input type="checkbox"/> No Window Treatments	<input type="checkbox"/> Study
<input type="checkbox"/> Atrium	<input type="checkbox"/> Cove Lighting	<input type="checkbox"/> Furnished: None	<input type="checkbox"/> Pantry	<input type="checkbox"/> Split Bedrooms
<input type="checkbox"/> Bay Window	<input type="checkbox"/> Den/Family Room	<input type="checkbox"/> Furnished: Some	<input type="checkbox"/> Plantation Shutters	<input type="checkbox"/> Track Lighting
<input type="checkbox"/> Bonus Room	<input type="checkbox"/> Dining Room	<input type="checkbox"/> GarageDoorOpener	<input type="checkbox"/> Rear Stairs	<input type="checkbox"/> W/D Connection
<input type="checkbox"/> Built-in Bookcases	<input type="checkbox"/> Elevator	<input type="checkbox"/> Garden Window	<input type="checkbox"/> Recessed Lighting	<input type="checkbox"/> Wallpaper
<input type="checkbox"/> CAT-5 Network Cable	<input type="checkbox"/> Elevator Ready	<input type="checkbox"/> Great Room	<input type="checkbox"/> Renovated	<input type="checkbox"/> Wet Bar
<input type="checkbox"/> Cedar Closet	<input type="checkbox"/> Fire Alarm	<input type="checkbox"/> Guest House	<input type="checkbox"/> Shelving	<input type="checkbox"/> Window Treatments
<input type="checkbox"/> Ceiling Fans	<input type="checkbox"/> Formal Dining	<input type="checkbox"/> Laminate Flooring	<input type="checkbox"/> Security System	<input type="checkbox"/> Other-See Remarks
<input type="checkbox"/> Ceilings above 9ft.	<input type="checkbox"/> Foyer	<input type="checkbox"/> Lock Out	<input type="checkbox"/> Skylight	
<input type="checkbox"/> Columns	<input type="checkbox"/> Furnished	<input type="checkbox"/> Newly Painted	<input type="checkbox"/> Smart Features (See Remarks)	

Interior Construction

<input type="checkbox"/> Ceiling: Beamed	<input type="checkbox"/> Ceiling: Vaulted	<input type="checkbox"/> Walls: Brick	<input type="checkbox"/> Walls: Paneled	<input type="checkbox"/> Walls: Wainscoting
<input type="checkbox"/> Ceiling: Cathedral	<input type="checkbox"/> Staircase: Curved	<input type="checkbox"/> Walls: Cedar	<input type="checkbox"/> Walls: Paneling	<input type="checkbox"/> Walls: Wood
<input type="checkbox"/> Ceiling: Crown Molding	<input type="checkbox"/> Staircase: Open	<input type="checkbox"/> Walls: Concrete	<input type="checkbox"/> Walls: Plaster	<input type="checkbox"/> Woodwork: Painted
<input type="checkbox"/> Ceiling: Raised	<input type="checkbox"/> Staircase: Spiral	<input type="checkbox"/> Walls: Cypress	<input type="checkbox"/> Walls: Sheetrock	<input type="checkbox"/> Woodwork: Stained
<input type="checkbox"/> Ceiling: Trayed/Coffered	<input type="checkbox"/> Walls: Block	<input type="checkbox"/> Walls: Mirrored	<input type="checkbox"/> Walls: Stucco	<input type="checkbox"/> Other-See Remarks

Kitchen/Breakfast

<input type="checkbox"/> Breakfast Area	<input type="checkbox"/> Breakfast Room	<input type="checkbox"/> Country Kitchen	<input type="checkbox"/> Gourmet Kitchen	<input type="checkbox"/> Keeping Room
<input type="checkbox"/> Breakfast Bar	<input type="checkbox"/> Butler Pantry	<input type="checkbox"/> Galley Kitchen	<input type="checkbox"/> Island	

Laundry

<input type="checkbox"/> Basement	<input type="checkbox"/> Garage	<input type="checkbox"/> Laundry Chute	<input type="checkbox"/> Upstairs	<input type="checkbox"/> Other
<input type="checkbox"/> Bathroom	<input type="checkbox"/> Hall	<input type="checkbox"/> Laundry Room	<input type="checkbox"/> Washer Connection	<input type="checkbox"/> None
<input type="checkbox"/> Dryer Connection	<input type="checkbox"/> Kitchen	<input type="checkbox"/> Sink		

Master Bedroom Features

<input type="checkbox"/> Carpeted	<input type="checkbox"/> First Floor	<input type="checkbox"/> Master Main	<input type="checkbox"/> Master Up	<input type="checkbox"/> Split Plan
<input type="checkbox"/> Cathedral Ceilings	<input type="checkbox"/> Hardwood	<input type="checkbox"/> Master Suite	<input type="checkbox"/> Sitting Area	<input type="checkbox"/> Walk-in Closet
<input type="checkbox"/> Fireplace				

Master Bath Features

<input type="checkbox"/> ADA Compliant	<input type="checkbox"/> Double Vanity	<input type="checkbox"/> Separate Shower	<input type="checkbox"/> Tile	<input type="checkbox"/> Walk-In Tub
<input type="checkbox"/> Bidet	<input type="checkbox"/> Dressing Area	<input type="checkbox"/> Shower Only	<input type="checkbox"/> Tub	<input type="checkbox"/> Wet Room
<input type="checkbox"/> Carpeted	<input type="checkbox"/> Garden Tub	<input type="checkbox"/> Single Vanity	<input type="checkbox"/> Tub/Shower	<input type="checkbox"/> Whirlpool Bath
<input type="checkbox"/> Cultured Marble	<input type="checkbox"/> Sauna/Steam	<input type="checkbox"/> Skylight	<input type="checkbox"/> Walk-in Closet	

Units (Visit <http://forms.mygiar.com> for the entire Rooms form.)

Bedrooms: _____ **Full Baths:** _____ **Half Baths:** _____ **Total Rooms:** _____

Unit Stories: _____ **Floor Location:** _____ **Rent:** _____ **Deposit:** _____ **Parking Spaces:** _____

Lockbox: _____ **Unit Available Date:** ___/___/____ **Tenant Occupied:** Yes / No **Lease Term Ends:** ___/___/____

Features

<input type="checkbox"/> Carpet	<input type="checkbox"/> Disposal	<input type="checkbox"/> Furnished	<input type="checkbox"/> Patio	<input type="checkbox"/> Washer
<input type="checkbox"/> Central Air	<input type="checkbox"/> Dryer	<input type="checkbox"/> Handicapped	<input type="checkbox"/> Range	<input type="checkbox"/> Window Units
<input type="checkbox"/> Central Heat	<input type="checkbox"/> Fire Alarm	<input type="checkbox"/> Hardwood Floors	<input type="checkbox"/> Refrigerator	<input type="checkbox"/> Other
<input type="checkbox"/> Deck	<input type="checkbox"/> Fireplace	<input type="checkbox"/> Other Heat	<input type="checkbox"/> W/D Connection	<input type="checkbox"/> None
<input type="checkbox"/> Dishwasher				

Property

Lot Description

<input type="checkbox"/> Acreage 1-5	<input type="checkbox"/> Dead End	<input type="checkbox"/> Leased Land	<input type="checkbox"/> Rolling-Gentle	<input type="checkbox"/> Will Divide
<input type="checkbox"/> Acreage 5-10	<input type="checkbox"/> Exceptional View	<input type="checkbox"/> Level Lot	<input type="checkbox"/> Rolling-Rough	<input type="checkbox"/> Wooded
<input type="checkbox"/> Acreage 10+	<input type="checkbox"/> Fill Needed	<input type="checkbox"/> Low	<input type="checkbox"/> Rural	<input type="checkbox"/> Wooded-Heavy
<input type="checkbox"/> Additional Land Available	<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Marshland	<input type="checkbox"/> Sidewalk	<input type="checkbox"/> Wooded-Partial
<input type="checkbox"/> Brush	<input type="checkbox"/> Flood Zone-Some Areas	<input type="checkbox"/> No Mineral Rights	<input type="checkbox"/> Sloping	<input type="checkbox"/> Woods Trail
<input type="checkbox"/> Bulkhead/Seawall	<input type="checkbox"/> Frontage	<input type="checkbox"/> Open Land	<input type="checkbox"/> Steep	<input type="checkbox"/> Yard Well
<input type="checkbox"/> Bush-Hogged	<input type="checkbox"/> Golf Course	<input type="checkbox"/> Pasture	<input type="checkbox"/> Storm Sewer	<input type="checkbox"/> Zero Lot Line
<input type="checkbox"/> Cleared	<input type="checkbox"/> Greenbelt	<input type="checkbox"/> Privacy	<input type="checkbox"/> Subdivision Recorded	<input type="checkbox"/> Other
<input type="checkbox"/> Corner	<input type="checkbox"/> Interior	<input type="checkbox"/> Private Backyard	<input type="checkbox"/> Subdivision Unrecorded	<input type="checkbox"/> None/Condo
<input type="checkbox"/> Cul-de-sac	<input type="checkbox"/> Irregular	<input type="checkbox"/> Property Corners Marked	<input type="checkbox"/> Townhouse	
<input type="checkbox"/> Curb & Gutter	<input type="checkbox"/> Landscaped	<input type="checkbox"/> Rocky	<input type="checkbox"/> Wetlands	

Lot View/Frontage

<input type="checkbox"/> Beach Dunes Frontage	<input type="checkbox"/> Deep Water View	<input type="checkbox"/> Lake View	<input type="checkbox"/> Park Frontage	<input type="checkbox"/> Stream
<input type="checkbox"/> Beach Dunes View	<input type="checkbox"/> Golf Course Frontage	<input type="checkbox"/> Marsh Frontage	<input type="checkbox"/> Park View	<input type="checkbox"/> Tidal Creek
<input type="checkbox"/> Beach Frontage	<input type="checkbox"/> Golf Course View	<input type="checkbox"/> Marsh View	<input type="checkbox"/> Pond	<input type="checkbox"/> Village Area
<input type="checkbox"/> Beach View	<input type="checkbox"/> Lagoon Frontage	<input type="checkbox"/> Natural	<input type="checkbox"/> Residential	<input type="checkbox"/> Waterfront
<input type="checkbox"/> Creek	<input type="checkbox"/> Lagoon View	<input type="checkbox"/> Ocean Front	<input type="checkbox"/> River Frontage	<input type="checkbox"/> Other
<input type="checkbox"/> Deep Water Frontage	<input type="checkbox"/> Lake Frontage	<input type="checkbox"/> Ocean View	<input type="checkbox"/> River View	

Road Surface

<input type="checkbox"/> Asphalt	<input type="checkbox"/> Curb	<input type="checkbox"/> Graded/Maintained	<input type="checkbox"/> Shell	<input type="checkbox"/> Unpaved
<input type="checkbox"/> Brick	<input type="checkbox"/> Curb & Gutter	<input type="checkbox"/> Gravel	<input type="checkbox"/> Stone	<input type="checkbox"/> Other
<input type="checkbox"/> Cobblestone	<input type="checkbox"/> Dirt	<input type="checkbox"/> Paved	<input type="checkbox"/> Trail	<input type="checkbox"/> None
<input type="checkbox"/> Concrete				

Access

<input type="checkbox"/> Airstrip	<input type="checkbox"/> Dirt Road	<input type="checkbox"/> No Road	<input type="checkbox"/> Public	<input type="checkbox"/> US Hwy
<input type="checkbox"/> City Road	<input type="checkbox"/> Easement	<input type="checkbox"/> Other-See Remarks	<input type="checkbox"/> State Hwy	<input type="checkbox"/> Water Access Only
<input type="checkbox"/> Controlled Access	<input type="checkbox"/> Near Interstate	<input type="checkbox"/> Private	<input type="checkbox"/> Trail	<input type="checkbox"/> No Access
<input type="checkbox"/> County Road	<input type="checkbox"/> No Driveway			

Flood Zone: Yes / No

Tax ID/Parcel # 2: _____

Road Frontage (ft): _____

Golf Course Hole #: _____

X Zone: Yes / No

Legal Description: _____

Water Frontage (ft): _____

Waterway Name: _____

Tax ID/Parcel # 1: _____

Approx Acreage: _____

Golf Course Name: _____

Road Resp: _____

Zoning Description

<input type="checkbox"/> Agricultural	<input type="checkbox"/> County	<input type="checkbox"/> Mixed Use	<input type="checkbox"/> Patio/Duplex	<input type="checkbox"/> Residential
<input type="checkbox"/> City	<input type="checkbox"/> Historical	<input type="checkbox"/> Mobile Home	<input type="checkbox"/> Res Multi	<input type="checkbox"/> Resort
<input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial	<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Res Single	<input type="checkbox"/> Unrestricted
<input type="checkbox"/> Condo				

Waterfront: Yes / No

Waterfront Type

<input type="checkbox"/> Beach	<input type="checkbox"/> Lagoon	<input type="checkbox"/> Ocean	<input type="checkbox"/> Stream
<input type="checkbox"/> Creek	<input type="checkbox"/> Lake	<input type="checkbox"/> Pond	<input type="checkbox"/> Tidal Creek
<input type="checkbox"/> Deep Water	<input type="checkbox"/> Marsh	<input type="checkbox"/> River	
<input type="checkbox"/> Beach	<input type="checkbox"/> Lagoon	<input type="checkbox"/> Ocean	

Systems

Cable

<input type="checkbox"/> Cable Access	<input type="checkbox"/> Cable in Street	<input type="checkbox"/> Cable Ready	<input type="checkbox"/> None
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of Cool Units: _____

Cool Source

<input type="checkbox"/> Electric	<input type="checkbox"/> Gas	<input type="checkbox"/> Solar	<input type="checkbox"/> Other	<input type="checkbox"/> None
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Cool Type

<input type="checkbox"/> Central	<input type="checkbox"/> Heat Pump	<input type="checkbox"/> Whole House Fan	<input type="checkbox"/> Zoned	<input type="checkbox"/> None
<input type="checkbox"/> Common	<input type="checkbox"/> Wall Unit	<input type="checkbox"/> Window Unit	<input type="checkbox"/> Other	

Electric

<input type="checkbox"/> 3 Phase	<input type="checkbox"/> 440 Volt	<input type="checkbox"/> Heavy Duty	<input type="checkbox"/> RV 30 Amp	<input type="checkbox"/> Other
<input type="checkbox"/> 110 Volt	<input type="checkbox"/> Circuit Breakers	<input type="checkbox"/> Light Duty	<input type="checkbox"/> RV 50 Amp	<input type="checkbox"/> None
<input type="checkbox"/> 220 Volt	<input type="checkbox"/> Fuses			

of Heat Units: _____ **Heat Source**
 Electric Oil Solar Wood None
 Gas Propane Steam Other

Heat Type
 Baseboard Floor Furnace Radiator / Radiant Wall Unit Zoned
 Central Forced Air Space Heater Window Unit Other
 Common Heat Pump Unit Heater Wood Stove None

Gas
 Natural Gas Private LP Tank Propane None

Sewer
 Available Lift Station Public Sewer In Street Unknown
 Community Private Septic Tank Storm Sewer None
 Grinder Pump

Telephone: Available / DSL / Installed **Underground Utilities:** Yes / No

Water
 Community System Private Well Unknown None Available
 Community Well PublicWater Other

of Water Heaters: _____ **Water Heater Type**
 Electric Leased Owned Solar Timed
 Gas Oil Rented Tankless None
 Insulated

Financial

Master Assoc: Yes / No **Mandatory:** Yes / No **Fee Amount:** _____ **Assoc Name:** _____ **Assoc Phone:** _____

Master Association Fee Frequency
 Annual Monthly Quarterly Weekly None
 Bimonthly One-Time Semi-Annual Other

Community Assoc: Yes / No **Mandatory:** Yes / No **Fee Amount:** _____ **Assoc Name:** _____ **Assoc Phone:** _____

Community Association Fee Frequency
 Annual Monthly Quarterly Weekly None
 Bimonthly One-Time Semi-Annual Other

Association Fees Included
 Cable Groundskeeping Rec Facilities Sewer Trash Disposal
 Electric Hazard Insurance Recycling Taxes Water
 Flood Insurance Management Repairs/Maint Telephone Other
 Gas Pest Control Reserves Termite Bond

Association Fees Included
 Barbeque Grill Dock Golf Min Rental Period Playground
 Beach Elevator Handicap Provisions No Rental Pond
 Boat Ramp Exercise Room Hot Tub No Short Term Pool
 Cable Deep Water Landscaped Pavilion/Gazebo Security System
 Community Room Fenced Laundry Pet-Friendly Separate Storage
 Deck Game Room Marina Pets-No Pets Allowed Spa
 Deed Access Gated Community Membership Appl Rights Picnic Area Tennis Courts

Maint Fee: _____ **Maint Fee Paid:** _____ **Annual Flood Insurance:** _____ **Fire Dept Dues:** Yes / No

Sub Lease: Yes / No **Tax Year:** _____ **Tax Amount:** _____ **Trash Collection:** _____ **Trash Collection Fee:** _____

Showing

Internet Listing Display: Yes / No **Internet Address Allowed:** Yes / No **IDX Consumer Comment:** Yes / No **IDX Automated Valuation:** Yes / No

Virtual Tour Unbranded 1 Link: _____ **Virtual Tour Unbranded 2 link:** _____

Virtual Tour Branded 1 link: _____ **Virtual Tour Branded 2 link:** _____

Sign on Property: Yes / No

Showing Instructions

- | | | | | |
|--|---|--|---|--|
| <input type="checkbox"/> 24 Hour Access | <input type="checkbox"/> Call Listing Agent | <input type="checkbox"/> Key On-Site Office | <input type="checkbox"/> Other | <input type="checkbox"/> Special Hours |
| <input type="checkbox"/> Appointment-Agent | <input type="checkbox"/> Gate Code Req | <input type="checkbox"/> Non GIMLS Lockbox | <input type="checkbox"/> Owner Occupied | <input type="checkbox"/> Special Notice |
| <input type="checkbox"/> Appointment-Only | <input type="checkbox"/> Gate Pass Req | <input type="checkbox"/> Lockbox - SentiLock | <input type="checkbox"/> Show At Will | <input type="checkbox"/> See Agent Remarks |
| <input type="checkbox"/> Call for Lockbox Code | <input type="checkbox"/> Key In Office | | | |

Showing Information

- | | | | | |
|---|-----------------------------------|--|---|---|
| <input type="checkbox"/> Alarm-Must Call Office | <input type="checkbox"/> No A.M. | <input type="checkbox"/> On-Site Rental Office | <input type="checkbox"/> Pet-Must Call Office | <input type="checkbox"/> Under Construction |
| <input type="checkbox"/> Day Sleeper | <input type="checkbox"/> No Sign | <input type="checkbox"/> On-Site Sales Office | <input type="checkbox"/> See Agent Remarks | <input type="checkbox"/> Vacant |
| <input type="checkbox"/> Model Home | <input type="checkbox"/> Occupied | <input type="checkbox"/> Owner Occupied | <input type="checkbox"/> Tenant Occupied | |

Remarks

Directions:

Public Remarks:

REALTOR® Remarks:

Office Notes:
