



iRealty Flat Fee Brokerage
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2-4 Unit Data In-put Form

Sellers Name(s):	
Property Address:	
Seller Address:	
Phone #	Email Address:

BASIC LISTING INFORMATION			
Parcel No.:	Multiple PIN Numbers: <input type="checkbox"/> Yes <input type="checkbox"/> No		
County:	Township:		
Corporate Limits of –or- Unincorporated:	Subdivision:	Model:	
Coordinates (required in City of Chicago) : North _____ South _____ East _____ West _____			

GENERAL INFORMATION	
Directions to Property (Max 100 characters):	

SCHOOL INFORMATION	
Elementary District #:	Elementary School Name:
	2 nd /Alternate Elementary School Name:
Jr High/Middle District #:	Jr High/Middle School Name:
	2 nd /Alternative Jr High/Middle School Name:
High School District #:	High School Name:
	2 nd /Alternative High School Name:
Other Public District #:	Other Public School Name:

Ownership Type: <input type="checkbox"/> Condo <input type="checkbox"/> Fee Simple <input type="checkbox"/> Fee Simple w/HO Assn		
Built before 1978 <input type="checkbox"/> Yes <input type="checkbox"/> No	Recent Rehab <input type="checkbox"/> Yes <input type="checkbox"/> No	Existing Basement/Foundation <input type="checkbox"/> Yes <input type="checkbox"/> No
Waterfront <input type="checkbox"/> Yes <input type="checkbox"/> No		

PARKING DETAILS Parking On-Site? <input type="checkbox"/> Yes <input type="checkbox"/> No Parking Ownership <input type="checkbox"/> Owned <input type="checkbox"/> Transferrable Lease <input type="checkbox"/> Deeded Sold Separately <input type="checkbox"/> Fee/Leased <input type="checkbox"/> N/A List # of Parking Spaces: _____	Parking Details <input type="checkbox"/> Assigned Spaces <input type="checkbox"/> Unassigned <input type="checkbox"/> Off Alley <input type="checkbox"/> Off Street <input type="checkbox"/> Side Apron <input type="checkbox"/> Zoned Permit <input type="checkbox"/> Visitor Parking <input type="checkbox"/> Valet <input type="checkbox"/> Underground/Covered <input type="checkbox"/> Driveway <input type="checkbox"/> None/NA	Lowest Parking Fee: \$ _____ Highest Parking Fee: \$ _____ Deeded Parking Cost: \$ _____ (If Sold Separately) Fee/Lease Parking Cost: \$ _____ (If Fee/Leased)
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INTERIOR FEATURES # Units in Building _____ # 1/2 Baths in Building _____	# of Rooms in Building _____ 3 Bedroom Unit in Building <input type="checkbox"/> Yes <input type="checkbox"/> No # of Bedrooms in Building _____ # Full Baths in Building _____	Basement <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> Walkout <input type="checkbox"/> English <input type="checkbox"/> None	Basement Description <input type="checkbox"/> Finished <input type="checkbox"/> Partially Finished <input type="checkbox"/> Unfinished <input type="checkbox"/> Crawl <input type="checkbox"/> Cellar <input type="checkbox"/> Sub-Basement <input type="checkbox"/> Slab <input type="checkbox"/> Exterior Access <input type="checkbox"/> Other <input type="checkbox"/> Rough-In <input type="checkbox"/> None
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	Floor #	# Rooms	# Bedrooms	# Full Baths	# Half Baths	Master Bedroom Bath	Security Deposit	Rent Amount	Lease Exp Date
Unit 1						<input type="checkbox"/> Full <input type="checkbox"/> Half <input type="checkbox"/> Shared <input type="checkbox"/> None	\$ _____	\$ _____	___/___/___
Unit 2						<input type="checkbox"/> Full <input type="checkbox"/> Half <input type="checkbox"/> Shared <input type="checkbox"/> None	\$ _____	\$ _____	___/___/___
Unit 3						<input type="checkbox"/> Full <input type="checkbox"/> Half <input type="checkbox"/> Shared <input type="checkbox"/> None	\$ _____	\$ _____	___/___/___
Unit 4						<input type="checkbox"/> Full <input type="checkbox"/> Half <input type="checkbox"/> Shared <input type="checkbox"/> None	\$ _____	\$ _____	___/___/___

	Unit 1	Unit 2	Unit 3	Unit 4
Appliances/Features:	<input type="checkbox"/> Stove <input type="checkbox"/> Refrigerator <input type="checkbox"/> Washer <input type="checkbox"/> Dryer <input type="checkbox"/> Dishwasher <input type="checkbox"/> Microwave <input type="checkbox"/> Disposal <input type="checkbox"/> Compactor <input type="checkbox"/> Central A/C <input type="checkbox"/> Window A/C <input type="checkbox"/> Fireplace-Artificial <input type="checkbox"/> Fireplace –Gas <input type="checkbox"/> Garage/Space <input type="checkbox"/> None <input type="checkbox"/> Laundry Hook-Up <input type="checkbox"/> Range Hood <input type="checkbox"/> Cathedral Ceilings <input type="checkbox"/> Hardwood Floors <input type="checkbox"/> Skylights/Windows <input type="checkbox"/> Walk-In Closet	<input type="checkbox"/> Stove <input type="checkbox"/> Refrigerator <input type="checkbox"/> Washer <input type="checkbox"/> Dryer <input type="checkbox"/> Dishwasher <input type="checkbox"/> Microwave <input type="checkbox"/> Disposal <input type="checkbox"/> Compactor <input type="checkbox"/> Central A/C <input type="checkbox"/> Window A/C <input type="checkbox"/> Fireplace-Artificial <input type="checkbox"/> Fireplace –Gas <input type="checkbox"/> Garage/Space <input type="checkbox"/> None <input type="checkbox"/> Laundry Hook-Up <input type="checkbox"/> Range Hood <input type="checkbox"/> Cathedral Ceilings <input type="checkbox"/> Hardwood Floors <input type="checkbox"/> Skylights/Windows <input type="checkbox"/> Walk-In Closet	<input type="checkbox"/> Stove <input type="checkbox"/> Refrigerator <input type="checkbox"/> Washer <input type="checkbox"/> Dryer <input type="checkbox"/> Dishwasher <input type="checkbox"/> Microwave <input type="checkbox"/> Disposal <input type="checkbox"/> Compactor <input type="checkbox"/> Central A/C <input type="checkbox"/> Window A/C <input type="checkbox"/> Fireplace-Artificial <input type="checkbox"/> Fireplace –Gas <input type="checkbox"/> Garage/Space <input type="checkbox"/> None <input type="checkbox"/> Laundry Hook-Up <input type="checkbox"/> Range Hood <input type="checkbox"/> Cathedral Ceilings <input type="checkbox"/> Hardwood Floors <input type="checkbox"/> Skylights/Windows <input type="checkbox"/> Walk-In Closet	<input type="checkbox"/> Stove <input type="checkbox"/> Refrigerator <input type="checkbox"/> Washer <input type="checkbox"/> Dryer <input type="checkbox"/> Dishwasher <input type="checkbox"/> Microwave <input type="checkbox"/> Disposal <input type="checkbox"/> Compactor <input type="checkbox"/> Central A/C <input type="checkbox"/> Window A/C <input type="checkbox"/> Fireplace-Artificial <input type="checkbox"/> Fireplace –Gas <input type="checkbox"/> Garage/Space <input type="checkbox"/> None <input type="checkbox"/> Laundry Hook-Up <input type="checkbox"/> Range Hood <input type="checkbox"/> Cathedral Ceilings <input type="checkbox"/> Hardwood Floors <input type="checkbox"/> Skylights/Windows <input type="checkbox"/> Walk-In Closet

		<input type="checkbox"/> Handicap Access	<input type="checkbox"/> Handicap Access	<input type="checkbox"/> Handicap Access	<input type="checkbox"/> Handicap Access
		Unit 1	Unit 2	Unit 3	Unit 4
Tenant Pays:		<input type="checkbox"/> All <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Heat <input type="checkbox"/> Parking <input type="checkbox"/> Scavenger <input type="checkbox"/> Sewer <input type="checkbox"/> Water <input type="checkbox"/> Other <input type="checkbox"/> None	<input type="checkbox"/> All <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Heat <input type="checkbox"/> Parking <input type="checkbox"/> Scavenger <input type="checkbox"/> Sewer <input type="checkbox"/> Water <input type="checkbox"/> Other <input type="checkbox"/> None	<input type="checkbox"/> All <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Heat <input type="checkbox"/> Parking <input type="checkbox"/> Scavenger <input type="checkbox"/> Sewer <input type="checkbox"/> Water <input type="checkbox"/> Other <input type="checkbox"/> None	<input type="checkbox"/> All <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Heat <input type="checkbox"/> Parking <input type="checkbox"/> Scavenger <input type="checkbox"/> Sewer <input type="checkbox"/> Water <input type="checkbox"/> Other <input type="checkbox"/> None

Bath Amenities:		<input type="checkbox"/> Whirlpool <input type="checkbox"/> Separate Shower <input type="checkbox"/> Handicap Shower <input type="checkbox"/> Steam Shower <input type="checkbox"/> Double Sink <input type="checkbox"/> Bidet <input type="checkbox"/> Garden Tub <input type="checkbox"/> European Shower <input type="checkbox"/> Full Body Spray Shower <input type="checkbox"/> Double Shower <input type="checkbox"/> Soaking Tub <input type="checkbox"/> No Tub	<input type="checkbox"/> Whirlpool <input type="checkbox"/> Separate Shower <input type="checkbox"/> Handicap Shower <input type="checkbox"/> Steam Shower <input type="checkbox"/> Double Sink <input type="checkbox"/> Bidet <input type="checkbox"/> Garden Tub <input type="checkbox"/> European Shower <input type="checkbox"/> Full Body Spray Shower <input type="checkbox"/> Double Shower <input type="checkbox"/> Soaking Tub <input type="checkbox"/> No Tub	<input type="checkbox"/> Whirlpool <input type="checkbox"/> Separate Shower <input type="checkbox"/> Handicap Shower <input type="checkbox"/> Steam Shower <input type="checkbox"/> Double Sink <input type="checkbox"/> Bidet <input type="checkbox"/> Garden Tub <input type="checkbox"/> European Shower <input type="checkbox"/> Full Body Spray Shower <input type="checkbox"/> Double Shower <input type="checkbox"/> Soaking Tub <input type="checkbox"/> No Tub	<input type="checkbox"/> Whirlpool <input type="checkbox"/> Separate Shower <input type="checkbox"/> Handicap Shower <input type="checkbox"/> Steam Shower <input type="checkbox"/> Double Sink <input type="checkbox"/> Bidet <input type="checkbox"/> Garden Tub <input type="checkbox"/> European Shower <input type="checkbox"/> Full Body Spray Shower <input type="checkbox"/> Double Shower <input type="checkbox"/> Soaking Tub <input type="checkbox"/> No Tub
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Additional Rooms		<input type="checkbox"/> 1 st Floor Bedroom <input type="checkbox"/> 2 nd Kitchen <input type="checkbox"/> Den <input type="checkbox"/> Dark Room <input type="checkbox"/> Enclosed Balcony <input type="checkbox"/> Enclosed Porch <input type="checkbox"/> Exercise Room <input type="checkbox"/> Family Room <input type="checkbox"/> Foyer <input type="checkbox"/> Gallery <input type="checkbox"/> Great Room <input type="checkbox"/> InLaw Arrangement <input type="checkbox"/> Laundry Room(s) <input type="checkbox"/> Library <input type="checkbox"/> Loft <input type="checkbox"/> Maid's Room <input type="checkbox"/> Screened Porch <input type="checkbox"/> Recreation Room <input type="checkbox"/> Sitting Room <input type="checkbox"/> Sun/Florida Room <input type="checkbox"/> Utility Room/1 st Floor <input type="checkbox"/> Utility Room/2 nd Floor <input type="checkbox"/> Workroom	<input type="checkbox"/> 1 st Floor Bedroom <input type="checkbox"/> 2 nd Kitchen <input type="checkbox"/> Den <input type="checkbox"/> Dark Room <input type="checkbox"/> Enclosed Balcony <input type="checkbox"/> Enclosed Porch <input type="checkbox"/> Exercise Room <input type="checkbox"/> Family Room <input type="checkbox"/> Foyer <input type="checkbox"/> Gallery <input type="checkbox"/> Great Room <input type="checkbox"/> InLaw Arrangement <input type="checkbox"/> Laundry Room(s) <input type="checkbox"/> Library <input type="checkbox"/> Loft <input type="checkbox"/> Maid's Room <input type="checkbox"/> Screened Porch <input type="checkbox"/> Recreation Room <input type="checkbox"/> Sitting Room <input type="checkbox"/> Sun/Florida Room <input type="checkbox"/> Utility Room/1 st Floor <input type="checkbox"/> Utility Room/2 nd Floor <input type="checkbox"/> Workroom	<input type="checkbox"/> 1 st Floor Bedroom <input type="checkbox"/> 2 nd Kitchen <input type="checkbox"/> Den <input type="checkbox"/> Dark Room <input type="checkbox"/> Enclosed Balcony <input type="checkbox"/> Enclosed Porch <input type="checkbox"/> Exercise Room <input type="checkbox"/> Family Room <input type="checkbox"/> Foyer <input type="checkbox"/> Gallery <input type="checkbox"/> Great Room <input type="checkbox"/> InLaw Arrangement <input type="checkbox"/> Laundry Room(s) <input type="checkbox"/> Library <input type="checkbox"/> Loft <input type="checkbox"/> Maid's Room <input type="checkbox"/> Screened Porch <input type="checkbox"/> Recreation Room <input type="checkbox"/> Sitting Room <input type="checkbox"/> Sun/Florida Room <input type="checkbox"/> Utility Room/1 st Floor <input type="checkbox"/> Utility Room/2 nd Floor <input type="checkbox"/> Workroom	<input type="checkbox"/> 1 st Floor Bedroom <input type="checkbox"/> 2 nd Kitchen <input type="checkbox"/> Den <input type="checkbox"/> Dark Room <input type="checkbox"/> Enclosed Balcony <input type="checkbox"/> Enclosed Porch <input type="checkbox"/> Exercise Room <input type="checkbox"/> Family Room <input type="checkbox"/> Foyer <input type="checkbox"/> Gallery <input type="checkbox"/> Great Room <input type="checkbox"/> InLaw Arrangement <input type="checkbox"/> Laundry Room(s) <input type="checkbox"/> Library <input type="checkbox"/> Loft <input type="checkbox"/> Maid's Room <input type="checkbox"/> Screened Porch <input type="checkbox"/> Recreation Room <input type="checkbox"/> Sitting Room <input type="checkbox"/> Sun/Florida Room <input type="checkbox"/> Utility Room/1 st Floor <input type="checkbox"/> Utility Room/2 nd Floor <input type="checkbox"/> Workroom
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WATER	SEWER	HEAT/FUEL		EQUIPMENT	
<input type="checkbox"/> Lake Michigan <input type="checkbox"/> Public <input type="checkbox"/> Private Company <input type="checkbox"/> Well Community <input type="checkbox"/> Well Private <input type="checkbox"/> Well Private Company <input type="checkbox"/> Well Shared <input type="checkbox"/> Other	<input type="checkbox"/> Septic –Mechanical <input type="checkbox"/> Septic – Private <input type="checkbox"/> Septic – Shared <input type="checkbox"/> Sewer – Public <input type="checkbox"/> Sewer Storm <input type="checkbox"/> Holding Tank(s) <input type="checkbox"/> Overhead Sewers <input type="checkbox"/> Other	<input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> Propane <input type="checkbox"/> Solar <input type="checkbox"/> Forced Air <input type="checkbox"/> Hot Water/Steam <input type="checkbox"/> Baseboard <input type="checkbox"/> Radiant	<input type="checkbox"/> Gravity Air <input type="checkbox"/> Heat Pump <input type="checkbox"/> Radiators <input type="checkbox"/> Space Heaters <input type="checkbox"/> 2+ Separate Heating Systems <input type="checkbox"/> Individual Controls <input type="checkbox"/> Zoned <input type="checkbox"/> Other <input type="checkbox"/> None	<input type="checkbox"/> Humidifier <input type="checkbox"/> Water Softener-Owned <input type="checkbox"/> Water Softener-Rented <input type="checkbox"/> Central Vacuum <input type="checkbox"/> TV-Cable <input type="checkbox"/> TV-Dish <input type="checkbox"/> TV-Antenna <input type="checkbox"/> TV-Rotor <input type="checkbox"/> Security System <input type="checkbox"/> Intercom <input type="checkbox"/> Fire Sprinklers	<input type="checkbox"/> CO Detectors <input type="checkbox"/> Ceiling Fans <input type="checkbox"/> Fan-Attic Exhaust <input type="checkbox"/> Fan-Whole House <input type="checkbox"/> Sump Pump <input type="checkbox"/> Sprinkler Lawn <input type="checkbox"/> Air Cleaner <input type="checkbox"/> Air Exchanger <input type="checkbox"/> Backup Sump Pump <input type="checkbox"/> Radon Mitigation System(s) <input type="checkbox"/> Power Generator

ENERGY/GREEN BUILDING RATING SOURCE		GREEN FEATURES	
<input type="checkbox"/> Energy Star Homes <input type="checkbox"/> LEED-H Certified <input type="checkbox"/> LEED- H Silver <input type="checkbox"/> LEED-H Gold <input type="checkbox"/> LEED-H Platinum <input type="checkbox"/> NAHB Emerald <input type="checkbox"/> NAHB Bronze <input type="checkbox"/> NAHB Silver <input type="checkbox"/> NAHB Gold <input type="checkbox"/> Chicago Green Homes <input type="checkbox"/> Other HERS INDEX SCORE: _____		<input type="checkbox"/> Photovoltaic/Solar System <input type="checkbox"/> Pre-wired for PV/Solar <input type="checkbox"/> Solar Hot Water <input type="checkbox"/> Geothermal Heating/Cooling System <input type="checkbox"/> Tankless hot water heater <input type="checkbox"/> Enhanced Air Filtration <input type="checkbox"/> Low flow commode <input type="checkbox"/> Low flow fixtures <input type="checkbox"/> Native/drought resistant landscaping <input type="checkbox"/> Rainwater Collection System <input type="checkbox"/> Green roof	
TAX/ASSESSMENTS	Tax Exemptions		Other Additional Income
Tax Year _____	<input type="checkbox"/> Homeowner <input type="checkbox"/> Senior <input type="checkbox"/> Senior Freeze <input type="checkbox"/> Other <input type="checkbox"/> None	Total Rental Income \$ _____	<input type="checkbox"/> Coin Laundry <input type="checkbox"/> Garage(s) <input type="checkbox"/> Parking Space(s) <input type="checkbox"/> Other
Taxes \$ _____	Special Assessments <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	Net Operating Income \$ _____	
	Special Service Area <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Included in Tax Bill	Gross Income \$ _____	
	If Yes, enter Fee \$ _____	Gross Expenses \$ _____	
BUYER TAKES POSSESSION	SALE TERMS	Is Seller/Owner a licensed Real Estate Agent?	
<input type="checkbox"/> Closing <input type="checkbox"/> Immediate <input type="checkbox"/> Lease Back Required <input type="checkbox"/> Negotiable <input type="checkbox"/> Prior to Closing <input type="checkbox"/> Specific Date <input type="checkbox"/> Tenant's Rights <input type="checkbox"/> Other	<input type="checkbox"/> Conventional <input type="checkbox"/> FHA <input type="checkbox"/> VA <input type="checkbox"/> Assumption-Conv. <input type="checkbox"/> Assumption - FHA <input type="checkbox"/> Assumption – VA <input type="checkbox"/> Release Required <input type="checkbox"/> Contract (Articles) for Deed <input type="checkbox"/> Lease/Purchase <input type="checkbox"/> Owner May Help/Assist <input type="checkbox"/> Purchase Money Mortgage <input type="checkbox"/> Rent w/Option <input type="checkbox"/> Rewrite/Blend <input type="checkbox"/> Trade/Exchange <input type="checkbox"/> Cash Only <input type="checkbox"/> Other	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Owner of Record Name 1:			
Owner of Record Name 2:			
SHOWING INSTRUCTIONS:		Upon contract continue to show:	
Contact Phone #:		Email Address:	
Special Showing Instructions (24hr notice, no showings after 7pm, etc.):			