COMMERCIAL LEASE LISTING INPUT FORM AGENT NAME _____ TODAY'S DATE _____

LOCATION & LIS	SIING INF	ORMAII	ON						* indicates a Required field	
Street Address*										
City*		State*	k.	Zip*			County*	N	ILS Area Number*	
		_								
Subdivision/Complex* Parc		Parce	el Tax ID*	Additio	nal Parcel Tax	x IDs				
Legal Description	on*									
Dromont / Trimo*							Drocord Charles			
Property Type*	1						Present Status*	C		
-			taurant	O Wareh			Build to Suit		To Be Built	
Office ORef		OReta	-	Other	-		OExisting Building		O Vacant Land	
Asking Lease Amount*			Listing Date*		Expirat	tion D	ate*	Owner I	Name*	
Possible Uses* (you must s	elect at le	ast 1 option from the	list below)						
		<u>Industri</u>	ial <u>Retail</u>		ail	Land			<u>Other</u>	
Office Building		🗌 Flex S	pace Strip C		trip Center	nter 🗖 Lease		ed Land 🛛 Special Purpose		
Medical Office	-		facturing	🗖 R	egional Center/	Mall				
Office Space Ware			house	A	nchor					
Executive Suite				🗖 R	estaurant					
Office Condo		🗖 Retail Pad								
				🗖 Fi	ree Standing Bu	ilding				
				Πv	ehicle Related					
Virtual Tour URL										
ATTRIBUTES & BL	JILDING II	NFORMA	TION							
Unit Sq. Ft.			Office Sq. Ft.		Wareho	Warehouse Sq. Ft.			3 Phase Electric Svc	
Hello			Hello		Hello			O Yes	<mark>◯</mark> No	
# Floors	Elevator	r	Ceiling Height							
Hello	○ Yes	ON0	○< 8 Feet 08-1	0 Feet 🛛 🤇	11-15 Feet	016-2	20 Feet 🛛 🔾 20+ Fee	t 🔵 Gara	ge OVaried Heights	
Parking Spaces	5		Parking Description	on						
\odot 1-5 Spaces	O 21-35	Spaces	Assigned		Covered		🗖 Garage		Off-Site	
\odot 6-10 Spaces	○ 6-10 Spaces ○ 36-55 Spaces		Common Dowr		Downtown Stre	own Street 🛛 🗖 Gravel			Paved	
\odot 11-20 Spaces	○ 56+ Sp	aces								
Heating										
Baseboard Fl		🗖 Floc	or Furnace 📃 Natural Ga		al Gas	s 🗌 Radiant Electric			Wall Heater	
Electric Baseboard		🗌 Ford	ced Air	🗌 Oil			Radiant Water		Wood	
Hot Water Baseboard		🗖 Gas	Forced Air	Passive Solar			Solar Wood/Coal		Wood/Coal	
Central		🗖 Gas	Hot Water	🗖 Prima	Primary Solar		🗌 Solar Assist	Zoned		
🗆 Electric 🔤 G		🗌 Gra	vity	🗖 Propa	Propane		Space Heater			
Electric Forced Air		🗖 Hea	at Pump 🔲 Radiant (Ce		nt (Ceiling/Floor	-)	Stove			
Cooling										
AC Unit		🗖 Cen	tral Air	🗌 Varies						
Ceiling Fans			imp Cooler	🗖 None						

BIG SKY COUNTRY MULTIPLE LISTING SERVICE COMMERCIAL LEASE LISTING INPUT FORM

LOT/UTILITY INFORMAT	ION					* indicates a Required fie			
Lot Size	Flood Plain	F	Planning Ju	isdiction*					
	○ Yes	O No	⊃ City	\bigcirc County	\bigcirc Other	\bigcirc None			
oning*	·	·							
O AE - Agricultural Exclusion	ve			○ R1 - Resider	ntial Single-Household L	ow Density			
○ AR - Agricultural & Rural Residential				○ R2 - Resider	O R2 - Residential Two-Household Medium Density				
\bigcirc AS - Agricultural Suburban				O R3 - Resider	\odot R3 - Residential Medium Density				
\bigcirc B1 - Neighborhood Business				○ R4 - Resider	O R4 - Residential High Density				
\odot B2 - Community Business				O R5 - Resider	\odot R5 - Residential Mixed-Use High Density				
O B3 - Central Business				○ RB - Recrea	O RB - Recreational Business				
\bigcirc BP - Business Park				\bigcirc RO - Reside	\odot RO - Residential Office				
O CO - Casino Overlay				\odot RR - Rural R	esidential				
OHMU - Historical Mixed	Use			\odot RS - Resider	ntial Suburban				
) M1 - Light Manufacturi	ng			O RX - Existing	g Residential				
OM2 - Manufacturing &	ndustrial (MI)			O RXHD - Exis	ting Residential High De	nsity			
ONCO - Neighborhood Co	onservation Overla	у		O RXMD - Exis	sting Residential Mediur	n Density			
O PLI - Public Lands & Ins	titutions			O CALL - Call L	isting Agent for Details				
Jtility Services*									
Cable	🗖 Co	mm. Water Sys	tem	🔲 Off Grid/No	Electricity	Spring Water			
City Sewer				🗌 Private Wel	Telephone				
City Water Fiber Optic				Septic					
Common Well	🗖 Ge	enerator		Sewer to Lot					
Comm. Sewer System	🗖 Na	itural Gas		🗌 Solar Power					
INANCIAL INFORMAT	ION					* indicates a Required fie			
andlord Pays									
Electricity	-			🗖 RE Taxes	🗖 Water				
Garbage	🗖 Janitorial 📃		nsurance	Sewer	🗖 Other (er	enter this information in Remarks)			
lenant Pays									
Parking	Garbage		rance	🗌 Maintenand	e 🗌 Taxes	🗖 Water			
Electric	🗖 Gas	🗌 Lawı	n Care	Sewer	🗖 Varies				
Rent Amount	NNN per SF	per Year	Total SF (Cost	Monthly Cost	CoOp Fee*			
Rental Rate Terms				Lease Type					
○ Nightly	\bigcirc Monthly	⊖ Cont	act Agent	Full Service	🗆 Net	□ N/A			
Weekly O Yearly				Gross		□ Other			
Terms Acceptable				Assumable					
Cash Lease C	ption/Purchase	🗖 Lease t	o Own	○ Yes	○ No				
COMPENSATION & SH	OWING INFORM	ATION				* indicates a Required fie			
Currently Occupied	Occupant		Lockbox	Туре*					
) Yes	\bigcirc Owner		○ Supra		\bigcirc Listing Agent to Acc	ompany			
O No	\bigcirc Partially Le	eased	○ SentriLo	ock	\bigcirc None				
\bigcirc Totally Leased			\odot Key at (Office					
	\bigcirc Vacant								
Showing Instructions*									

REMARKS & DIRECTIONS

Directions

* indicates a Required field

Public Remarks*

Agent Remarks

SYNDICATION * indicates a Required field							
IDX Include* IDX Include Addres		List Hub*	VOW Comment*	Automated Valuation*			
○ Yes	○ Yes	○ Yes	○ Yes	○ Yes			
○ No	○ No	⊖ No	⊖ No	⊖ No			

ADDITIONAL AGENT NOTES