

CONDO SUPPLEMENT FORM

Border Indicates Required Field

Note: The Condo Supplement Form can be used with the Residential Input Form.

ML# _____ ADDRESS _____
SYSTEM ASSIGNED

CONDO CONVERSION? YES / NO

UPPER CONDO LEVEL 2

CONDO UNITS IN COMPLEX, NUMBER OF 3

TOTAL LEVELS IN BUILDING 2

ELEVATOR ACCESS? YES / NO

DECK/BALCONY AVAILABLE? YES / NO

STORAGE AVAILABLE? YES / NO

DECK/BALCONY SQFT 5

STORAGE UNIT NUMBER / ID 10

DECK/BALCONY DIMENSIONS _____ 20

PARKING SPACE NUMBER / ID 10

WASHER/DRYER DESCRIPTION (1) HOOKUP PAY-USE SHARED

FLOOR PLAN/UNIT TYPE _____ 20

CONDO PET POLICIES _____ 25

CONDO ASSOCIATION NAME _____ 30

PENDING HOA LITIGATION? YES / NO

CONDO ASSOCIATION CONTACT _____ 30

CONDO ASSOCIATION PHONE 3 - 3 - 4

CONDO ASSOCIATION URL _____ 100

CONDO PUBLIC REMARKS

(MAX 250 CHARS)

PUBLIC REMARKS INTENDED FOR PUBLIC VIEWING. CONFIDENTIAL INFORMATION SHOULD BE EXCLUDED.

NO PERSONAL PROMOTION OR BROKER/OWNER CONTACT INFORMATION ALLOWED IN THIS SECTION.

RMLS™ 05.12 INPUT _____

SELLER(S) INITIALS

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