

(4) CLASS

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\$26.50 per listing



Multiple Listing Form for MANUFACTURED Tehama County Association Of REALTORS®

Once all required fields are completed, print & fax to 530-529-5710 OR Mail to: TCAOR-956 Walnut St., Red Bluff, CA 96080

\*\* ALL FIELDS MARKED WITH AN ASTERISK (\*) MUST BE FILLED IN \*\*

(Select ONE Only)

\* TYPE

- 1.Manufactured in Park
2.Manufactured on land
3. Mobile
4. Modular
5. Other
6. Mobile on Land
7. Mobile in Park

\* AREA: \_\_\_\_\_

\* PRICE: \$ \_\_\_\_\_

\* ADDRESS: \_\_\_\_\_ Street # St. Dir. Street Name

\* CITY: \_\_\_\_\_ \* ZIP: \_\_\_\_\_

\*\*SELECT ONLY ONE OPTION UNDER THE FOLLOWING KEYWORDS \*\*

Table with 5 columns: Stories, Sq. Foot, Age, Water, Acres. Each column contains 7 options with checkboxes.

\* # of Bedrooms: \* # of Full Baths: \* # of Half Baths: \* Garage Capacity: \* # of Acres:

\*Listing Type (check only ONE):

- Exclusive Agency Exclusive Right to Sell Limited Services MLS Entry-Only Open Probate

# of Units: Lot Dimensions:

\*Lot Description (check only ONE): Agriculture City Lot Cleared Lot Corner Lot Cul-De-Sac Flood Plain

- Horse Prop In Park Irregular Level Level/Rolling Mountainous Other Ranch River Front
River View Rolling Steep View Water Frontage Wooded

Are You a REALTOR®? YES NO

\*Listing Agent:

\*Listing Office:

\*Phone: ( ) - \*List Agent Fax#: ( ) - Cell Phone: ( ) -

\*E-Mail:

Co-Listing Agent & Office:

\* Selling Office %: Variable Commission (Y/N):

\* Owner Name:

Owner Phone: \* Occupied YES NO

Occupant Name: \_\_\_\_\_ Occupant Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

\* **List Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

\* **Expire Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

\* **Year Built:** \_\_\_\_\_ (if New construction, put year being completed) \* **APN#:** \_\_\_\_\_

\* **Zoning:** \_\_\_\_\_ \* **Cross Street:** \_\_\_\_\_

Subdivision: \_\_\_\_\_ \* **Total Square Feet:** \_\_\_\_\_

**MOBILE HOME INFO:**

\* **Manufacturer's Name :** \_\_\_\_\_ Model: \_\_\_\_\_

\* **Width:** \_\_\_\_\_ \* **Length:** \_\_\_\_\_

Date of Manufacture: \_\_\_\_\_ Property is on: (Check One)  Local Property Tax Roll  
 Dept. of Housing & Comm. Dev. (HCD)

HCD/HUD License/Decal #: \_\_\_\_\_

Serial Numbers: 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

HCD/HUD Label/Insignia: 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_

Park Name: \_\_\_\_\_ Space Rent: \$ \_\_\_\_\_

\* **Total # of Rooms:** \_\_\_\_\_ (Bathrooms Not Included) \* **Possession** (Check ONE)  COE  COE+30  COE+5  
 Immediate  To Be Arranged

Key Location (Check one):  Combo Lockbox  Key in Office  Lockbox on Front Door  Lockbox on Gas Meter  
 Lockbox on Hose Bib  Other (see remarks)

\* **LOCKBOX TYPE:**  Combo Lockbox  None  OOC Lockbox  Other  Tehama/Shasta

\* **REO:** YES  NO  \* **SHORT SALE:** YES  NO  Sign (Y/N) \_\_\_\_\_

Virtual Tour URL: \_\_\_\_\_ Tour Date: \_\_\_\_\_

Directions: \_\_\_\_\_

Association Dues/Utilities: \_\_\_\_\_ Frequency:  Monthly  Yearly

**PUBLIC REMARKS (1000 Characters)**

\_\_\_\_\_

**AGENT TO AGENT REMARKS (1000 Characters)**

\_\_\_\_\_

<p><b>A. APPLIANCES</b></p> <input type="checkbox"/> 1. Central Vacuum <input type="checkbox"/> 2. Dishwasher <input type="checkbox"/> 3. Disposal <input type="checkbox"/> 4. Double Oven <input type="checkbox"/> 5. Dryer <input type="checkbox"/> 6. Elec. Range/Oven <input type="checkbox"/> 7. Elec. Surface Unit <input type="checkbox"/> 8. Gas Range/Oven <input type="checkbox"/> 9. Gas Surface Unit <input type="checkbox"/> 10. Indoor Grill <input type="checkbox"/> 11. Microwave <input type="checkbox"/> 12. Range Hood <input type="checkbox"/> 13. Refrigerator <input type="checkbox"/> 14. Trash Compactor <input type="checkbox"/> 15. Wall Oven <input type="checkbox"/> 16. Washer <input type="checkbox"/> 17. Water Filter <input type="checkbox"/> 18. Freezer <input type="checkbox"/> 19. Other-See Remarks	<p><b>E. DOCUMENTS ON FILE</b></p> <input type="checkbox"/> 1. Appraisal <input type="checkbox"/> 2. CC&R's <input type="checkbox"/> 3. Home Inspection <input type="checkbox"/> 4. Leases <input type="checkbox"/> 5. NHD Report <input type="checkbox"/> 6. Plot Plan <input type="checkbox"/> 7. Septic Inspection <input type="checkbox"/> 8. Survey <input type="checkbox"/> 9. Termite Report <input type="checkbox"/> 10. Transfer Disclosure <input type="checkbox"/> 11. Well Water Test <input type="checkbox"/> 12. 433 <input type="checkbox"/> 13. Other-See Remarks	<p><b>I. FENCING</b></p> <input type="checkbox"/> 1. Front <input type="checkbox"/> 2. None <input type="checkbox"/> 3. Partial <input type="checkbox"/> 4. Perimeter <input type="checkbox"/> 5. Perimeter/Cross <input type="checkbox"/> 6. Rear <input type="checkbox"/> 7. Other/See Remarks	<p><b>*M. GARAGE TYPE</b></p> <input type="checkbox"/> 1. None <input type="checkbox"/> 2. Garage Attached <input type="checkbox"/> 3. Garage Detached <input type="checkbox"/> 4. Garage Workshop <input type="checkbox"/> 5. Carport Attached <input type="checkbox"/> 6. Carport Detached <input type="checkbox"/> 7. Drive Under <input type="checkbox"/> 8. Other-See Remarks
<p><b>B. BATH FEATURES</b></p> <input type="checkbox"/> 1. Shower-None <input type="checkbox"/> 2. Shower-Stall <input type="checkbox"/> 3. Shower-Tub <input type="checkbox"/> 4. Tub - Garden <input type="checkbox"/> 5. Tub - Jetted <input type="checkbox"/> 6. Tub - Standard <input type="checkbox"/> 7. Tub - Sunken <input type="checkbox"/> 8. Other-See Remarks	<p><b>F. DRIVEWAY</b></p> <input type="checkbox"/> 1. Asphalt <input type="checkbox"/> 2. Concrete <input type="checkbox"/> 3. Dirt <input type="checkbox"/> 4. Gravel <input type="checkbox"/> 5. None <input type="checkbox"/> 6. Other-See Remarks	<p><b>J. FIREPLACE</b></p> <input type="checkbox"/> 1. Fireplace Insert <input type="checkbox"/> 2. Free Standing <input type="checkbox"/> 3. Gas Log <input type="checkbox"/> 4. Gas Starter <input type="checkbox"/> 5. Heat-a-lator <input type="checkbox"/> 6. In Family Room <input type="checkbox"/> 7. In Living Room <input type="checkbox"/> 8. In Master Bedroom <input type="checkbox"/> 9. Kerosene <input type="checkbox"/> 10. None <input type="checkbox"/> 11. Wood Stove <input type="checkbox"/> 12. One <input type="checkbox"/> 13. Two <input type="checkbox"/> 14. Three or More <input type="checkbox"/> 15. Wood Pellet Stove <input type="checkbox"/> 16. Other-See Remarks	<p><b>*N. GAS</b></p> <input type="checkbox"/> 1. Natural <input type="checkbox"/> 2. None <input type="checkbox"/> 3. Propane <input type="checkbox"/> 4. Other-See Remarks
<p><b>*C. COOLING</b></p> <input type="checkbox"/> 1. Central Air <input type="checkbox"/> 2. Evaporative Central <input type="checkbox"/> 3. Evaporative <input type="checkbox"/> 4. Wall/Window Unit <input type="checkbox"/> 5. Other-See Remarks <input type="checkbox"/> 6. None	<p><b>G. EXTERIOR</b></p> <input type="checkbox"/> 1. Metal <input type="checkbox"/> 2. Stucco <input type="checkbox"/> 3. Vinyl <input type="checkbox"/> 4. Wood <input type="checkbox"/> 5. Other-See Remarks	<p><b>K. FLOORS</b></p> <input type="checkbox"/> 1. Slab <input type="checkbox"/> 2. Wood <input type="checkbox"/> 3. Other-See Remarks	<p><b>*O. HEAT</b></p> <input type="checkbox"/> 1. Baseboard <input type="checkbox"/> 2. Central <input type="checkbox"/> 3. Electric <input type="checkbox"/> 4. Floor Furnace <input type="checkbox"/> 5. Heat Pump <input type="checkbox"/> 6. Monitor Type <input type="checkbox"/> 7. Natural Gas <input type="checkbox"/> 8. None <input type="checkbox"/> 9. Propane <input type="checkbox"/> 10. Space Heater <input type="checkbox"/> 11. Wall Furnace <input type="checkbox"/> 12. Wall Heater <input type="checkbox"/> 13. Wood <input type="checkbox"/> 14. Kerosene <input type="checkbox"/> 15. Other-See Remarks
<p><b>D. DECK/PATIO</b></p> <input type="checkbox"/> 1. Covered <input type="checkbox"/> 2. Deck <input type="checkbox"/> 3. Patio <input type="checkbox"/> 4. Patio-Screened <input type="checkbox"/> 5. Other-See Remarks	<p><b>H. EXTERIOR AMENITIES</b></p> <input type="checkbox"/> 1. Above Ground Pool <input type="checkbox"/> 2. Barn <input type="checkbox"/> 3. Built-in Hot Tub <input type="checkbox"/> 4. Corral/Stable <input type="checkbox"/> 5. Dog Pen <input type="checkbox"/> 6. Fencing <input type="checkbox"/> 7. Free Stand Hot Tub <input type="checkbox"/> 8. Greenhouse <input type="checkbox"/> 9. Guest House <input type="checkbox"/> 10. Horse Allowed <input type="checkbox"/> 11. In-Ground Pool <input type="checkbox"/> 12. Outbuildings <input type="checkbox"/> 13. Paved Street <input type="checkbox"/> 14. RV Parking <input type="checkbox"/> 15. Satellite Dish <input type="checkbox"/> 16. Shed <input type="checkbox"/> 17. Solar <input type="checkbox"/> 18. Other-See Remarks	<p><b>*L. FOUNDATION</b></p> <input type="checkbox"/> 1. Foundation System <input type="checkbox"/> 2. Full Basement <input type="checkbox"/> 3. No Foundation <input type="checkbox"/> 4. Partial Basement <input type="checkbox"/> 5. Partial Foundation <input type="checkbox"/> 6. Perimeter Foundation <input type="checkbox"/> 7. Post & Pier <input type="checkbox"/> 8. County Approved <input type="checkbox"/> 9. Slab <input type="checkbox"/> 10. Other-See Remarks	<p><b>P. INSULATION</b></p> <input type="checkbox"/> 1. Original <input type="checkbox"/> 2. Partial <input type="checkbox"/> 3. Unknown <input type="checkbox"/> 4. Upgraded <input type="checkbox"/> 5. Other-See Remarks

<p><b>Q. INTERIOR AMENITIES</b></p> <input type="checkbox"/> 1. Breakfast Bar <input type="checkbox"/> 2. Cable <input type="checkbox"/> 3. Carpet <input type="checkbox"/> 4. Ceiling Fans(s) <input type="checkbox"/> 5. Garage Door Opener <input type="checkbox"/> 6. Handicap Access <input type="checkbox"/> 7. Intercom <input type="checkbox"/> 8. Multi-Phone Lines <input type="checkbox"/> 9. Newer Floor Cover <input type="checkbox"/> 10. Newer Paint <input type="checkbox"/> 11. Satellite Receiver <input type="checkbox"/> 12. Security System <input type="checkbox"/> 13. Tile Floors <input type="checkbox"/> 14. Vaulted Ceiling(s) <input type="checkbox"/> 15. Vinyl Floors <input type="checkbox"/> 16. Walk In Closet <input type="checkbox"/> 17. Wet Bar <input type="checkbox"/> 18. Whole House Fan <input type="checkbox"/> 19. Window Coverings <input type="checkbox"/> 20. Wood Floors <input type="checkbox"/> 21. Other-See Remarks	<p><b>*U. ROADS</b></p> <input type="checkbox"/> 1. Chip Sealed <input type="checkbox"/> 2. Dirt <input type="checkbox"/> 3. Gravel <input type="checkbox"/> 4. Paved <input type="checkbox"/> 5. Private <input type="checkbox"/> 6. Other-See Remarks	<p><b>*Y. SHOW INSTRUCTIONS</b></p> <input type="checkbox"/> 1. Appointment Only <input type="checkbox"/> 2. Beware of Dog <input type="checkbox"/> 3. Call First/LvMs/Go <input type="checkbox"/> 4. Call Listing Agent <input type="checkbox"/> 5. Call Listing Office <input type="checkbox"/> 6. Day Sleeper <input type="checkbox"/> 7. Leave Gates as Fnd <input type="checkbox"/> 8. Listing Agent to Acc. <input type="checkbox"/> 9. Lock Box Occupied <input type="checkbox"/> 10. Lock Box Vacant <input type="checkbox"/> 11. Restricted Days <input type="checkbox"/> 12. Restricted Hours <input type="checkbox"/> 13. Show Any Time <input type="checkbox"/> 14. 24 Hour Notice <input type="checkbox"/> 15. Key in Listing Office <input type="checkbox"/> 16. Other-See Remarks <input type="checkbox"/> 17. Call L.A. for Status	<p><b>ZC. WATER HEATER</b></p> <input type="checkbox"/> 1. Electric <input type="checkbox"/> 2. Natural Gas <input type="checkbox"/> 3. Propane <input type="checkbox"/> 4. Solar <input type="checkbox"/> 5. Other-See Remarks
<p><b>R. LANDSCAPING</b></p> <input type="checkbox"/> 1. Front <input type="checkbox"/> 2. Garden Area <input type="checkbox"/> 3. None <input type="checkbox"/> 4. Outdoor Lighting <input type="checkbox"/> 5. Rear <input type="checkbox"/> 6. Trees <input type="checkbox"/> 7. Other-See Remarks	<p><b>*V. ROOF</b></p> <input type="checkbox"/> 1. Composition <input type="checkbox"/> 2. Foam <input type="checkbox"/> 3. Metal <input type="checkbox"/> 4. Rolled <input type="checkbox"/> 5. Shake <input type="checkbox"/> 6. Slate <input type="checkbox"/> 7. Tile <input type="checkbox"/> 8. Other-See Remarks	<p><b>Z SPRINKLERS</b></p> <input type="checkbox"/> 1. Front <input type="checkbox"/> 2. None <input type="checkbox"/> 3. Rear <input type="checkbox"/> 4. Timed <input type="checkbox"/> 5. Drip System <input type="checkbox"/> 6. Other-See Remarks	<p><b>*ZD. WATER SUPPLY</b></p> <input type="checkbox"/> 1. City Available <input type="checkbox"/> 2. City Water <input type="checkbox"/> 3. Community <input type="checkbox"/> 4. Spring <input type="checkbox"/> 5. Well Needed <input type="checkbox"/> 6. Well Private <input type="checkbox"/> 7. Well Share <input type="checkbox"/> 8. Other-See Remarks <input type="checkbox"/> 9. None
<p><b>S. LAUNDRY</b></p> <input type="checkbox"/> 1. Area <input type="checkbox"/> 2. Closet <input type="checkbox"/> 3. In Garage <input type="checkbox"/> 4. Room <input type="checkbox"/> 5. Other-See Remarks	<p><b>W. ROOMS</b></p> <input type="checkbox"/> 1. Breakfast Nook <input type="checkbox"/> 2. Den <input type="checkbox"/> 3. Eat-in Kitchen <input type="checkbox"/> 4. Family Room <input type="checkbox"/> 5. Formal Dining Room <input type="checkbox"/> 6. Great Room <input type="checkbox"/> 7. Loft <input type="checkbox"/> 8. Mud Room <input type="checkbox"/> 9. Office <input type="checkbox"/> 10. Sunroom <input type="checkbox"/> 11. Utility Room <input type="checkbox"/> 12. Other-See Remarks	<p><b>*ZA. TERMS</b></p> <input type="checkbox"/> 1. Assumption <input type="checkbox"/> 2. Cash <input type="checkbox"/> 3. Cash- Existing Loan <input type="checkbox"/> 4. Cash to New Loan <input type="checkbox"/> 5. Lease Option <input type="checkbox"/> 6. Owner Carry <input type="checkbox"/> 7. Owner Carry 2 <sup>nd</sup> <input type="checkbox"/> 8. Submit <input type="checkbox"/> 9. Trade <input type="checkbox"/> 10. Other-See Remarks	<p><b>ZE. WINDOWS</b></p> <input type="checkbox"/> 1. Bay Window <input type="checkbox"/> 2. Double Pane <input type="checkbox"/> 3. Metal <input type="checkbox"/> 4. Skylight <input type="checkbox"/> 5. Storm Windows <input type="checkbox"/> 6. Vinyl Clad <input type="checkbox"/> 7. Wood Frames <input type="checkbox"/> 8. Single Pane <input type="checkbox"/> 9. Other-See Remarks
<p><b>T. POOL</b></p> <input type="checkbox"/> 1. Above Ground <input type="checkbox"/> 2. Gunite <input type="checkbox"/> 3. In-Ground Fiberglass <input type="checkbox"/> 4. In-Ground Liner <input type="checkbox"/> 5. Other-See Remarks	<p><b>*X. SEWER</b></p> <input type="checkbox"/> 1. Needs <input type="checkbox"/> 2. Septic <input type="checkbox"/> 3. Sewer <input type="checkbox"/> 4. Other-See Remarks	<p><b>ZB. WATER DISTRICT</b></p> <input type="checkbox"/> 1. Anderson/Cottonwd <input type="checkbox"/> 2. Corning Water Dis. <input type="checkbox"/> 3. El Camino Irrig <input type="checkbox"/> 4. Los Molinos <input type="checkbox"/> 5. Stanford/Vina <input type="checkbox"/> 6. Proberta <input type="checkbox"/> 7. Deer Creek	

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