

Listing Checklist

Address: _____ City: _____ Zip _____

Subdivision: _____ FMLS: _____ MLS: _____

Client1: _____ Client2: _____

Home: _____ Home: _____

Work: _____ Work: _____

Cell: _____ Cell: _____

Email: _____ Email: _____

Fax/Other: _____ Fax/Other: _____

Referred By: _____ List Price: _____

Listing Dates: _____ PriceReduction: _____ Date: _____

Caravan: _____ PhotoTour: _____ Termite Letter: _____

Lockbox: _____ Shackle: _____ CBS Code: _____

CLOSING CHECKLIST

Contract Date: _____ Accepted: _____ Originals: _____

Closing Date: _____ Inspection: _____ Termite: _____

Punch Out Complete: _____ Appraisal: _____ Utilities: _____

Attorney: _____ Phone: _____ Fax: _____

Contact: _____ Closing Date/Time: _____

Checklist Mailed: _____ Directions Mailed: _____

Loan Officer: _____ Company: _____ Office: _____

Processor: _____ Fax: _____ Office: _____

Selling Agent: _____ Company: _____ Office: _____

Fax: _____ Cell: _____