



Jackson Multiple Listing Service Business Opportunity Data Form

*MLS #: _____

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

(Select One Only) * TYPE: Wholesale, Retail, Hospitality, Manufacturing, Service. * AREA: * PRICE: \$ * ADDRESS: *St. # *St. Dir. *Street Name * CITY: * STATE: * ZIP CODE: *Board: JACKSON IDX: Y / N VOW: Y / N *List Agent/Office: *Co-Agent/Office: Additional Contact Information: *Type Of Listing Contract: ERS / ERS-EA / ERS-GR / ERS-VR / LIMITED SERVICE *Exclusive Agency: Y / N *Sub Agency: (8) *Buyer Agency: (8) *Trans. Broker: (8) *Commission Remarks: (30) *List Date: ___/___/___ *Expire Date: ___/___/___ *Value Range: Y / N *Owner Name: (50) *Lake Name: (25) *Directions/Cross Streets: 50 *School District: Subdivision: (25) *Township: *County: *Tax ID: (25) *Legal Description: (50) *Mineral Rights Included: Y / N / Unknown Type Of Business: (20) Business Name: (20) Ownership Type: (10) Zoning: (20) *Legal or Non-Conforming Use (Circle) Type Of Sale: (12) Allocation Of Business: Equipment \$: (7) Covenant Not To Compete: Miles: (3) Leasehold Imp.\$ (7) Years: (2) Covenant \$: (7) Goodwill \$: (7) Approx. Inventory \$: (7) Inv. Included In Price: Y / N Inv. In Addition To Price: Y / N Method Of Pricing Inv.: (15) Owned Since: (4) # Of Employees-FT: (3) # Of Employees -PT: (3) Owner Operated: (1) Seating Cap/Cust Area: (5) Living Quarters: Y / N # Of Bedrooms: (2) Lease: (8) Lease Monthly Rent \$: (6) Lease Expires: (5) Sq. Ft. Leased: (6) Vol. Sales/Services For: (4) Total Gross Sales/Services :\$ (8) Annual Expenses: Rent :\$ (8) Other :\$ (8) Depreciation :\$ (8) Total Income :\$ (8) Wages :\$ (8) Cost Of Sales/Services :\$ (8) Operating Expenses:\$ (8) Gross Profit :\$ (8) Rent (Real Estate) :\$ (8) Total Expenses :\$ (8) Rent (Equipment) :\$ (8) Net Profit Before Taxes :\$ (8) Taxes :\$ (8) Source Of Information : (11) Inventory Plus/Incl. :\$ (8)

*Assessments: Y / N Spec. Assessment & Type: (15) Ag. Tax Prog.: Y / N *SEV. :\$ (8) *SEV Yr.: (4) *Tax Value \$: (8) *Tax Yr.: (4) *Principle Res Exemption%: (3) *Summer Taxes \$: (10) *Winter Taxes \$: (10) *Total Taxes \$: (10) Village Taxes \$: (8) *Subject to Short Sale: Y / N Public Remarks: (500)

Private Remarks: (500)

The under signed owner(s) certifies that the above information on this property is accurately slated. Although the above information is assumed to be correct/accurate, JMLS/LCAR and/or its members do not guarantee its correctness/accuracy.

Owner's Signature Of Approval Date Signed Owner's Signature of Approval Date Signed Broker/Agent Signature Of Approval Date Signed



Jackson Multiple Listing Service Business Opportunity Data Form

Address: _____

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(50) FEATURES Under each category given select all numbers that apply.

A. BUSINESS TYPE	G. ROAD TYPE	J. RE AVAILABLE
<input type="checkbox"/> 1. Auto/Auto Pt.	<input type="checkbox"/> 1. Interstate	<input type="checkbox"/> 1. No Lease
<input type="checkbox"/> 2. Salon/Barber	<input type="checkbox"/> 2. US Highway	<input type="checkbox"/> 2. Mo-To-Mo RE
<input type="checkbox"/> 3. Restaurant	<input type="checkbox"/> 3. State	<input type="checkbox"/> 3. Yr- To-Yr RE
<input type="checkbox"/> 4. Bar/Tavern	<input type="checkbox"/> 4. Co/City	<input type="checkbox"/> 4. Long Term RE
<input type="checkbox"/> 5. Floral Greenhouse	<input type="checkbox"/> 5. Access	<input type="checkbox"/> 5. Opt Renew RE
<input type="checkbox"/> 6. Conven Store	<input type="checkbox"/> 6. Private	<input type="checkbox"/> 6. Op Buy RE
<input type="checkbox"/> 7. Party Store	<input type="checkbox"/> 7. Paved	<input type="checkbox"/> 7. Land Lease RE
<input type="checkbox"/> 8. Hotel/Motel	<input type="checkbox"/> 8. Dirt	<input type="checkbox"/> 8. May Reneg. RE
<input type="checkbox"/> 9. Special Gift	<input type="checkbox"/> 9. Gravel	<input type="checkbox"/> 9. RE For Sale
<input type="checkbox"/> 10. Laundry/Dry Cleaning	<input type="checkbox"/> 10. Alley	<input type="checkbox"/> 10. Sep Listing RE
<input type="checkbox"/> 11. Medical/Dental		<input type="checkbox"/> 11. RE Not Listed
<input type="checkbox"/> 12. Fast Food	H. SALE INCLUDE	K. LEASE EXPENSES
<input type="checkbox"/> 13. Ice Cream	<input type="checkbox"/> 1. Receivables	<input type="checkbox"/> 1. Taxes
<input type="checkbox"/> 14. Sales/Service	<input type="checkbox"/> 2. Assets	<input type="checkbox"/> 2. Building Insurance
<input type="checkbox"/> 15. Recreation	<input type="checkbox"/> 3. Business Name	<input type="checkbox"/> 3. Maint.
<input type="checkbox"/> 16. Repair	<input type="checkbox"/> 4. Inventory	<input type="checkbox"/> 4. In-Maintenance
<input type="checkbox"/> 17. Hardware	<input type="checkbox"/> 5. Customer	<input type="checkbox"/> 5. Sewer
<input type="checkbox"/> 18. Real Estate	<input type="checkbox"/> 6. Machine	<input type="checkbox"/> 6. Water
<input type="checkbox"/> 19. Insurance	<input type="checkbox"/> 7. Security System	<input type="checkbox"/> 7. Heat
<input type="checkbox"/> 20. Wholesale	<input type="checkbox"/> 8. Smoke Detector	<input type="checkbox"/> 8. Electric
<input type="checkbox"/> 21. Retail	<input type="checkbox"/> 9. Window Air	
<input type="checkbox"/> 22. Manufacturing	<input type="checkbox"/> 10. Signs	L. EXPENSES SHARED
<input type="checkbox"/> 23. Warehouse	<input type="checkbox"/> 11. SDD Liquor	<input type="checkbox"/> 1. Reception Area
<input type="checkbox"/> 24. Car Wash	<input type="checkbox"/> 12. SDM Liquor	<input type="checkbox"/> 2. Type
<input type="checkbox"/> 25. Health Club	<input type="checkbox"/> 13. CLS C LQ	<input type="checkbox"/> 3. Answer
	<input type="checkbox"/> 14. Lease	<input type="checkbox"/> 4. Receptionist
B. AVAILABLE PARKING	<input type="checkbox"/> 15. Lease Option	<input type="checkbox"/> 5. Trash
<input type="checkbox"/> 1. 1-5 Spaces	<input type="checkbox"/> 16. Options	<input type="checkbox"/> 6. Computer Service
<input type="checkbox"/> 2. 6-10 Spaces	<input type="checkbox"/> 17. Covenants	<input type="checkbox"/> 7. Closing
<input type="checkbox"/> 3. 11-20 Spaces	<input type="checkbox"/> 18. Franchise	<input type="checkbox"/> 8. Parking
<input type="checkbox"/> 4. 21-100 Spaces	<input type="checkbox"/> 19. Goodwill	<input type="checkbox"/> 9. Health Club
<input type="checkbox"/> 5. 100 + Spaces	<input type="checkbox"/> 20. Fixtures	<input type="checkbox"/> 10. Lawn
<input type="checkbox"/> 6. Paved	<input type="checkbox"/> 21. Leasehold Improvements	
<input type="checkbox"/> 7. Gravel	<input type="checkbox"/> 22. Telephone	M. DOCUMENTS
<input type="checkbox"/> 8. Enclosed	<input type="checkbox"/> 23. Real Estate	<input type="checkbox"/> 1. Copy Lease
<input type="checkbox"/> 9. Underground		<input type="checkbox"/> 2. Books
<input type="checkbox"/> 10. Ramp	I. SALE EXCLUDE	<input type="checkbox"/> 3. Empty Contract
<input type="checkbox"/> 11. Owned	<input type="checkbox"/> 1. Receivables	<input type="checkbox"/> 4. Drawings
<input type="checkbox"/> 12. Lease	<input type="checkbox"/> 2. Assets	<input type="checkbox"/> 5. Photos
<input type="checkbox"/> 13. Municipal	<input type="checkbox"/> 3. Business Name	<input type="checkbox"/> 6. Floor Plan
C. LOCATION	<input type="checkbox"/> 4. Inventory	<input type="checkbox"/> 7. UCC Search
<input type="checkbox"/> 1. Corner Lot	<input type="checkbox"/> 5. Customer	<input type="checkbox"/> 8. Sales Tax
<input type="checkbox"/> 2. Business Dis.	<input type="checkbox"/> 6. Machine	<input type="checkbox"/> 9. Equipment List
<input type="checkbox"/> 3. Industrial Park	<input type="checkbox"/> 7. Security System	<input type="checkbox"/> 10. Inventory List
<input type="checkbox"/> 4. Shop Center	<input type="checkbox"/> 8. Smoke Detector	<input type="checkbox"/> 11. P&L Statement
<input type="checkbox"/> 5. Mall	<input type="checkbox"/> 9. Window AC	<input type="checkbox"/> 12. Advertising Doc.
<input type="checkbox"/> 6. Prof. Center	<input type="checkbox"/> 10. Signs	<input type="checkbox"/> 13. Env. Phase 1
<input type="checkbox"/> 7. Strip Mall	<input type="checkbox"/> 11. SDD Liquor	<input type="checkbox"/> 14. Env. Phase 2
<input type="checkbox"/> 8. Free/Stand	<input type="checkbox"/> 12. SDM Liquor	<input type="checkbox"/> 15. Utility Expenses
D. TERMS	<input type="checkbox"/> 13. CLS C LQ	<input type="checkbox"/> 16. Covenants
<input type="checkbox"/> 1. Conventional	<input type="checkbox"/> 14. Lease	<input type="checkbox"/> 17. ADA Audit
<input type="checkbox"/> 2. Lease	<input type="checkbox"/> 15. Lease Option	<input type="checkbox"/> 18. Prs Prop Lst
<input type="checkbox"/> 3. Lease Purchase	<input type="checkbox"/> 16. Options	<input type="checkbox"/> 19. Easements
<input type="checkbox"/> 4. Exchange	<input type="checkbox"/> 17. Covenants	
<input type="checkbox"/> 5. Assume	<input type="checkbox"/> 18. Franchise	T. TRANSMIT TO INTERNET
<input type="checkbox"/> 6. Cash	<input type="checkbox"/> 19. Goodwill	<input type="checkbox"/> 1. Yes
<input type="checkbox"/> 7. Seller Nt. Sc. Ag.	<input type="checkbox"/> 20. Fixtures	<input type="checkbox"/> 2. No
<input type="checkbox"/> 8. Owner Financing	<input type="checkbox"/> 21. Lhld Imp	
E. SHOWING	<input type="checkbox"/> 22. Telephone	
<input type="checkbox"/> 1. Call L/O Show	<input type="checkbox"/> 23. Real Estate	
<input type="checkbox"/> 2. Confid Showing		
<input type="checkbox"/> 3. Employee Aware Showing		
<input type="checkbox"/> 4. LA Accompany		
F. POSSESSION		
<input type="checkbox"/> 1. Possession At Closing		
<input type="checkbox"/> 2. Call L/O Possession		
<input type="checkbox"/> 3. Owner Trade		
<input type="checkbox"/> 4. Other		

Owner's Approval Of The Above Features Selected Owner's Initials _____ Owner's Initials: _____ Broker/Agent Initials: _____