



- If not applicable, please add n/a
- Form must be completed in its entirety

Listing Net Sheet

Today's Date: _____ Short Sale: Yes _____ No _____

Agent's Name: _____ Agent's Office: _____

Phone No.: _____ Cell No.: _____

Fax No./ E-mail: _____

Purchase Price: \$ _____ Commission %: _____ / _____

Property Address: _____

City: _____ Zip Code: _____

Seller(s) Name: _____

Buyer(s) Name: _____

Pay Off Amount(s) 1st \$ _____ 2nd \$ _____

HOA Monthly Dues: \$ _____ HOA Delinquent (if any): \$ _____

Current Property Taxes: \$ _____

Delinquent Property Taxes (if any): \$ _____ Supplemental Taxes: \$ _____

Termite: \$ _____ Natural Hazard Report: \$ _____

Home Warranty: \$ _____ Closing Cost Credit: \$ _____

Admin/Transaction Coordinator Fee: \$ _____

Notes: _____
