



RESIDENTIAL DWELLING FEATURES FOR LAND PROPERTY WORKSHEET



The representations contained in this worksheet are made by the owner and are not the representations of the owner's agent or subagent. The worksheet is not a warranty or a guarantee of any kind by the owner or by any agent or subagent representing the owner of the property. This statement is not a substitute for any inspection. Potential purchasers are encouraged to obtain their own professional inspection and should not rely upon the information contained in this worksheet.

Please **PRINT** clearly in all blanks.

MLS # _____

Listing Address: 43598 SR 800, Woodsfield, OH 43793

Unit/Suite # _____

Listing Agent Name: Chip Carpenter

Listing Agent E-mail: chip@uc realestateand auction.com

Listing Agent Phone #: 614-206-1135

Extension: _____

Listing Brokerage: UC Real Estate and Auction Services

Listing Brokerage Phone #: 740-965-1208

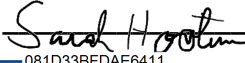
Extension: _____

RESIDENTIAL DWELLING ON PROPERTY INCLUDES THESE FEATURES. *Please Check ALL that Apply.*

Style		Notes
1	<input checked="" type="checkbox"/> 1 Story	
2	<input checked="" type="checkbox"/> 2 Story	In need of a lot of repair/cleaning
3	<input type="checkbox"/> 2 ½ Story	
4	<input type="checkbox"/> 3 Story	
5	<input type="checkbox"/> Bi-Level	
6	<input type="checkbox"/> Cape Cod / 1.5 Story	
7	<input type="checkbox"/> Split – 3 Level	
8	<input type="checkbox"/> Split – 4 Level	
9	<input type="checkbox"/> Split – 5 Level +	
Year Built		
10	<input type="checkbox"/> Type text re 2015 MF Home	
Bedroom Total		
11	<input type="checkbox"/> 4	
Full Baths Total		
12	<input type="checkbox"/> 2	
Half Baths Total		
13	<input type="checkbox"/> 1	
Parking Type (1 to 22 required)		
14	<input type="checkbox"/> 1 Car Garage	
15	<input type="checkbox"/> 2 Car Garage	
16	<input type="checkbox"/> 3 Car Garage	
17	<input type="checkbox"/> 4 Car Garage	
18	<input checked="" type="checkbox"/> 5 Car Garage\+	
19	<input type="checkbox"/> Attached Garage	
20	<input type="checkbox"/> 1 Carport	
21	<input type="checkbox"/> 2 Carport	
22	<input type="checkbox"/> 3 Carport\+	
23	<input type="checkbox"/> 1 Off Street	
24	<input type="checkbox"/> 2 Off Street	

Parking Type (1 to 22 required – continued)		
25	<input checked="" type="checkbox"/>	Detached Garage
26	<input checked="" type="checkbox"/>	Heated
27	<input type="checkbox"/>	Opener
28	<input type="checkbox"/>	Shared Driveway
29	<input type="checkbox"/>	Side Load
30	<input type="checkbox"/>	Tandem
31	<input type="checkbox"/>	On Street
32	<input type="checkbox"/>	Assigned
33	<input type="checkbox"/>	Lift
34	<input type="checkbox"/>	Common Area
35	<input type="checkbox"/>	Farm Building
Basement Y/N		
36	<input type="checkbox"/>	Yes
37	<input checked="" type="checkbox"/>	No
Alternate Uses		
38	<input type="checkbox"/>	Bed & Breakfast
39	<input type="checkbox"/>	Business Op
40	<input type="checkbox"/>	Commercial
41	<input checked="" type="checkbox"/>	Farm
42	<input type="checkbox"/>	Industrial
43	<input type="checkbox"/>	Multi-Family
44	<input type="checkbox"/>	Office
45	<input type="checkbox"/>	Rooming House

Signature of Owner(s)

DocuSigned by:

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Date: 10/14/2019

Signatures of Agent & Broker

Agent _____

Broker _____

Date: _____