

REMAX ONE

LEASE FILE

CHECKLIST

1-4 RESIDENTIAL UNITS



All documents listed below are **mandatory** to complete your file.

AGENT NAME: _____

PROPERTY ADDRESS: _____

LEASE LISTING AGREEMENT

- ☐ All documents that auto populate with Lease Listing Agreement (LL, RPOD, RPOA, CCPA-LL)
- ☐ Agency with Landlord Disclosure (AD-L)
- ☐ Multiple Listing Service Addendum (MLSA)
- ☐ Rental Property Owner Intake Form (RPOI)
- ☐ MLS Property Information Sheet

SALES DOCUMENTS

- ☐ Tenant Representation and Broker Compensation Agreement (TRBC)
- ☐ All documents that auto populate with Residential Lease Rental Agreement (RLMM, BBD, TFHD, RCJC, TRPR, FHDA, Mold Booklet)
- ☐ REMAX One Addendum - **Must be signed with the RLMM**
- ☐ Agency with Tenant (AD-T)
- ☐ Lead Based Paint Disclosure, **Property Built Prior to 1978** (LPD)
- ☐ EQ/Environmental Hazard Book Receipt, **Property Built Prior to 1960**
- ☐ Mold Ventilation Disclosure (LRM)
- ☐ RentSpree Screening/Application/Credit Release
- ☐ Copy of Tenant Checks: Landlord, Broker(s)
- ☐ Move In/Move Out Checklist
- ☐ Water Heater Smoke Detector Statement of Compliance (WHSD)
- ☐ Water Conservation and Carbon Monoxide Disclosure (WCMD)
- ☐ Fire hardening and Defensible Space Advisory and Disclosure, **if in a severe or high fire zone.** (FHDS)
- ☐ Local Area Lease Addendum Drafted by the Local Board of Realtors where the Property is located
- ☐ MISC. Addenda
- ☐ Any Additional CAR forms used in the transaction and not listed above.
- ☐ Sales Report

LEASE SALES REPORT

PROPERTY ADDRESS: _____

LEASE DATE: _____

LIST DATE: _____

LISTING OFFICE: _____

SELLING OFFICE: _____

LISTING AGENT: _____

SELLING AGENT: _____

PHONE NO.: _____

PHONE NO.: _____

LESSOR: _____

LESSEE: _____

PHONE NO.: _____

PHONE NO.: _____

MONTHLY RATE:

\$_____ X _____ (# of Months) = \$_____ Commission: _____

AMOUNT OF CHECK: \$_____

REMAX ONE PORTION: \$_____

OTHER BROKER PORTION: \$_____

DATE PAID: _____ CHECK NO. _____ AMOUNT \$_____

LESSOR PORTION: \$_____

DATE PAID: _____ CHECK NO. _____ AMOUNT \$_____

GROSS COMMISSION TOTAL: \$_____