



LISTING CONTRACT CHECKLIST

****Estimated time from open house to closing is approximately 10 weeks****

Complex & Unit Address: _____

Category _____ Square Feet _____ # of Bedrooms _____ # of Bathrooms _____

Owner (1) _____ Social Security # _____

Mailing Address _____ Phone # _____ Email: _____

Owner (2) _____ Social Security # _____

Mailing Address _____ Phone # _____ Email: _____

Present Lender: (name, org. and contact info): _____

Mortgage Account # (usually located at top of statement: (1st) _____ Balance _____

HOA Contact (Name and contact info): _____

HOA Dues \$ _____ ☐ Monthly ☐ Quarterly Dues cover: _____

Special Assessments: _____ Additional Utilities: _____

HOA Budget and minutes from recent HOA meeting provided (required): ☐ Yes ☐ No

Annual Property Taxes: _____ Contingencies _____

Pet Policy _____ Parking _____ Storage: _____

Inclusions: _____

Exclusions: _____

Title Co. Preference: ☐ Aspen Title ☐ Attorneys Title ☐ Land Title ☐ Title Co. of the Rockies

To help us better understand our housing needs – why are you selling your unit?

☐ Purchased other deed restricted housing - Where? _____

☐ Purchased free market housing - Where? _____

☐ Leaving the Roaring Fork Valley? _____

☐ Other, please specify: _____

TO BE COMPLETED BY APCHA

Original Purchase Price: _____ Appreciation: _____ Cap Imps: _____ Total Price: _____

Sales Fee: _____ Listing Fee: _____ Due at Closing: _____ Date Lstg. Fee Paid: _____

Open House Date: _____ Closing Date: _____ Additional Notes: _____