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SUBMIT TO:METROLIST, INC. P.O. BOX 4875 ENGLEWOOD, CO 80155 Fax to: (303) 850-9637 Office: (303) 850-9613 "•" Items MUST BE FILLED OUT or form will be returned. (Online Only - No Photo Taken)

• AREA • ADDRESSNUM* AD DIR* • STREET NAM	E*(Do Not Abbreviate) ST TYPE *	UNIT#
CITY (Do Not Abbreviate) SUBAREA (Do	o Not Abbreviate)	
SECURITY DEPOSIT • RENT*	• DATE AVAILABLE (DD-MMM-YYYY)	
\$		
TYPE (BEDROOMS TOTAL* SQUARE FEET (Total) BASEMENT Y Yes N No LEASETERM COMPENSATION Y Yes N No No	
REMARKS* R1		
• AGENT ID • LISTOR		PHL - -
● OFFICE ID ● OFFICE NAME		●PH O* - - - - - - -
• EXP DATE	• SIGNATURE	ENTERED WHERE Enter BO for Broker Office ENTERED BY Enter Initials of Entry Person
(BB-14114111 6.g., 01-3A14-2004)	METROLIST _{IN} : RENT Form (Revised 4/04) Copyright 1999-20	* Will print on newspaper ad

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