



MLS STATUS CHANGE / CORRECTION FORM

Instructions:

- **Email:** Complete, save, and email the form to info@wsgvar.com.
- **Mail:** Complete, print, mail the form to WSGVAR – 1039 E. Valley Blvd. #205B, San Gabriel, CA 91776
- **Fax:** Complete, print, fax the form to WSGVAR at 626-288-7658

Listing #: _____ **Property Type:** _____

Property Address: _____

Office Name: _____ **Agent Name:** _____ **Agent Public ID#: W** _____

Listing Date: _____ **Expiration Date:** _____

(CHECK ONE)

PENDING **ACTIVE UNDER CONTRACT**

Pending Date: _____

Purchase Contract Date: _____

Estimated COE/End Date: _____

Estimated Sale Price: _____

Estimated Financing Type: _____

Estimated Concession Amount: _____

Estimated Concessions Comments: _____

Buyer's Agent ID#: _____

Buyer's Agent Name: _____

Buyer's Agent CalBRE #: _____

Office Name: _____

SOLD

Pending Date: _____

COE Date: _____

Selling Price: _____

Financing Type: _____

Estimated Concession Amount: _____

Estimated Concessions Comments: _____

Buyer's Agent ID#: _____

Buyer's Agent Name: _____

Buyer's Agent CalBRE #: _____

Office Name: _____

LEASED

Lease Date: _____

Lease Signed

Leased Price: _____

Leasing Agent ID#: _____

Leasing Agent Name: _____

Leasing Agent CalBRE #: _____

Office Name: _____

OTHER STATUS CHANGE (CHECK ONE)

Back on Market

Cancelled - Date : _____

Withdrawn

Change Price

Expired - Date: _____

Extend Expiration Date

Expiration Date: _____

Hold Do Not Show

Activation Date: _____

Estimated date of when the listing is expected to go back to Active

ADDITIONAL CHANGES:

Owner's Signature: _____ **Date:** _____

Agent's Signature: _____ **Date:** _____

Broker's Signature: _____ **Date:** _____

(Broker's Signature is required for cancelling a listing)