

# SpecPrint Inc.

7P Aylesbury Road, Timonium, MD 21093 | Office: 410-561-9600 | Fax: 410-561-9051 | [www.specprint.com](http://www.specprint.com)

## SELECTED LIST ORDER FORM

Company \_\_\_\_\_  
Contact \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

OFFICE USE ONLY
Date Ordered:
Sales Representative:
Programming Fee:
Record Count:
Number of Selected List:
List Processed By:
Date Completed:

Do you currently subscribe to our "Directory Service?" YES \_\_\_\_\_ NO \_\_\_\_\_  
Do you want owners with more than one property reported for each parcel? YES \_\_\_\_\_ NO \_\_\_\_\_

1. STATE & COUNTY OF INTEREST: \_\_\_\_\_

2. CHOOSE THE FIELD CRITERIA & RANGE:

FIELD CRITERIA

A \_\_\_\_\_  
B \_\_\_\_\_  
C \_\_\_\_\_

RANGE OR SUBCATAGORIES

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

EXAMPLE: TOTAL VALUE

EXAMPLE: PROPERTIES EQUAL TO OR MORE THEN \$10,000

### AVAILABLE CATERGORIES (VARIES BY COUNTY)

- |                                   |                    |                        |                                    |
|-----------------------------------|--------------------|------------------------|------------------------------------|
| 1. MAP & PARCEL NUMBER            | 7. ACCOUNT NUMBER  | 13. EXTERIOR WALL TYPE | 19. FULE TYPE                      |
| 2. OWNER'S NAME                   | 8. LAND AREA       | 14. NUMBER OF ROOMS    | 20. TRANSFER DATE                  |
| 3. OWNER'S MAILING ADDRESS        | 9. DISTRICT CODE   | 15. STORES             | 21. CONSIDERATION                  |
| 4. PROPERTY DESCRIPTION           | 10. YEAR BUILT     | 16. BASEMENT           | 22. BUILDING, LAND AND TOTAL VALUE |
| 5. LAND USE CODE                  | 11. BUILDING AREA  | 17. BATHROOMS          | 23. AIR CONDITIONING               |
| 6. DEED REFERENCE (LIBER & FOLIO) | 12. BUILDING STYLE | 18. HEAT TYPE          |                                    |

Are you using this selected list for a mailing? YES \_\_\_\_\_ NO \_\_\_\_\_ (please check one)  
Add a control record at no extra cost? YES \_\_\_\_\_ NO \_\_\_\_\_ (please check one)

Mailing address \_\_\_\_\_

3. CHOOSE FORM OF OUTPUT MEDIA:

File Type (please check one) \_\_\_\_\_ ASCII (fixed length, with layout) \_\_\_\_\_ CSV (comma separated file)  
\_\_\_\_\_ FTP (file transfer protocol)  
\_\_\_\_\_ EMAIL ATTACHMENT EMAIL ADDRESS: \_\_\_\_\_  
\_\_\_\_\_ CD  
\_\_\_\_\_ HARDCOPY (11x8.5 printout, 2 sided)  
\_\_\_\_\_ MAILING LABELS

ALL PRODUCTS WILL BE SHIPPED UPS GROUND AT NO ADDITIONAL CHARGE

**DISCLAIMER:** The requester agrees to waive any liability resulting from the use of information. This waiver includes, but not limited to, any reliance by the requester or any other person on the accuracy, completeness or other attributes of the information. By signing below, the requestor acknowledges and agrees to this waiver. In addition, the purchaser agrees not to resell or provide copies of the information in their present format in any commercial endeavor.

\_\_\_\_\_  
SIGNATURE OF PURCHAER

\_\_\_\_\_  
DATE

\_\_\_\_\_  
REPRESENTING

\_\_\_\_\_  
CREDIT CARD NUMBER

\_\_\_\_\_  
EXP DATE

\_\_\_\_\_  
CSV NUMBER