

CLIENT NEEDS QUESTIONNAIRE

Completing this form will help me get to know more about you and the type of home you wish to purchase so when we meet we can zero in on communities and available homes meeting your criteria. I will work hard to help you achieve your goals and find the right home, at the best price, and to coordinate a smooth transaction.

Client(s) Street Address City/State/Zip

Phone: (H) (O) (M)

E-mail Other Contact
Preferred method of communication? (Phone, text, email)
To whom should communications be directed?

Do you currently own or rent your home?
If you rent a home, when does your lease expire?

Have you purchased a home previously, and if so, how many times and when?

Do you need to sell this home before you can buy?
If yes, have you made arrangements to put it on the market?
If not, would you be interested in my providing you with a Comparative Market Analysis?

How long have you lived in your current home?

What do you like most about your current home?
Least?

What is, or are, your primary reason(s) for purchasing a home at this time?

Have you already been looking for a home, and if so, how long?

Have you been looking at homes online, with an agent, or both?

Have you signed a buyer agency agreement with another agent?

Have you seen any homes that you like? (Addresses, subdivision, neighborhood, general location)

Approx. desired move date
How long do you plan to live in the home you purchase?
Have you been pre-qualified or approved by a lender?
Name of lender
Do you have a letter documenting this status?

If we found the perfect home for you today, what would you do?

of people in your household

Children/Ages

Other Dependents

Does everyone in your household know about the move?

What are their primary needs or concerns and why?

Do you have pets?

Employer(s)

Employer Location(s) if important to new home location

Family Hobbies & Interests – What do you like to do when you're not working or in school?

Will anyone else be involved in the decision and how can we involve them early on in the process?

What are the best days and times for you to look at property?

Would you like to receive automatic email notifications about newly listed homes that meet your primary parameters?

What are the three most valuable services that I can perform for you in purchasing a new home? Why are those important to you?

In past purchase transactions, were there things the associate did that you particularly appreciated or things that bothered you?

HOME FINDING

Type of Community Preferred Urban Suburban Rural or
Other (Describe)

Home Type (Check all that apply) Single Family Townhouse
Condo Duplex or Other (Describe)

Architectural Style(s) New Resale Both

Resale condition – Do you wish to see homes that may require some repairs &/or improvements or cosmetic upgrades? Comments

Construction Type (Brick, siding type, etc.) Sq. Ft Garage/Type/Size

Lot Size #Bedrooms #Baths

Formal Living Room (Yes or No)

Formal Dining Room (Yes or No)

Family/Great Room (Yes or No)

1st Floor Master (Yes or No)

Basement (Yes or No)

Fireplace (Yes or No)

Wood burning or gas?

Type of Heating System

Type of Cooling System

Pool (Yes or No)

Fenced Yard (Yes or No)

Recreational Facilities In Neighborhood? (Yes or No)

Other Desired Features or Amenities

Is access to shopping important? (Yes or No)

Types of Stores

If proximity to medical facilities is important, what is acceptable distance?

Desired Commute Time(s)

Access to public transportation (Yes or No)

Desired Schools or District(s)

Are there certain neighborhoods or subdivisions in which you are interested? Please list

Desired Price Range

Desired Monthly Payment

Approx. amount of funds available for down payment

Any current or past credit problems that may need to be addressed prior to beginning your home search?

Explain

Annual Income

Amount of monthly loan payments

Special Needs or Specific Concerns
