

BUYER QUESTIONNAIRE

NAME

PHONE

EMAIL

PHONE

EMAIL

PREFERRED METHOD OF CONTACT:

CALL

TEXT

EMAIL

PREFERRED TIME OF DAY:

INVOLVED HOME DECISION MAKERS:

YES

NO

NAME:

TARGET CONTRACT DATE:

TARGET MOVE-IN DATE:

PRICE RANGE:

PREAPPROVAL:

YES

NO

DATE:

LENDER

CONTACT

Area:

DESIRED AREA:

NEIGHBORHOOD:

DESIRED SCHOOL DISTRICT:

PREFERRED COMMUTE TIME TO WORK:

HOW IMPORTANT IS:

WALKABILITY?

NOT IMPORTANT

1

2

3

4

5

IMPORTANT

PROXIMITY TO WORKPLACE?

NOT IMPORTANT

1

2

3

4

5

IMPORTANT

SCHOOL DISTRICT?

NOT IMPORTANT

1

2

3

4

5

IMPORTANT

House:

ARCHITECTURE:

SQ. FT.

BEDS:

BATHS:

GARAGE:

AGE:

MOVE-IN-READY OR COULD-USE-SOME-WORK:

HOW IMPORTANT IS:

PLACEMENT OF BEDROOMS (TOGETHER)?

NOT IMPORTANT

1

2

3

4

5

IMPORTANT

PROXIMITY TO WORKPLACE?

NOT IMPORTANT

1

2

3

4

5

IMPORTANT

SCHOOL DISTRICT?

NOT IMPORTANT

1

2

3

4

5

IMPORTANT

MUST HAVES: