

Please Share Your Concerns

I am here to provide you with the best, most professional service while searching and purchasing a property that fits your needs. Most people have some anxiety or concern about the buying process. If I understand which aspects of the process are most important to you or are causing you the most anxiety I feel I can better serve you. Please take a few minutes to fill out the form below.

Thank You.

	Not Concerned			Very Concerned		
Determining How Much	0	1	2	3	4	5
Home You Can Afford						
Obtaining a Loan	0	1	2	3	4	5
Finding A Home That Meets						
Your Needs	0	1	2	3	4	5
Negotiating Price	0	1	2	3	4	5
Negotiating Other contract						
Details (i.e. possession date,	0	1	2	3	4	5
inspections, closing costs, etc)						
Understanding Paperwork						
(i.e. purchase contract,	0	1	2	3	4	5
disclosures, inspection report, etc)						
Arranging Inspections	0	1	2	3	4	5
Getting The Best Deal	0	1	2	3	4	5
Closing/Possession Date	0	1	2	3	4	5
Closing Costs	0	1	2	3	4	5
Communication w/ Broker	0	1	2	3	4	5
Finding Time to Look At						
Homes	0	1	2	3	4	5

Do you have any other concerns about the process of purchasing your home?

Is there anything specific I can do to make the process easier for you?

Please take a moment to fill out the following worksheet. In doing so, you will be helping me better understand what exactly you are looking for.

Neighborhood(s): _____

Bedrooms (Select Minimum) ☐ 1 ☐ 2 ☐ 3 ☐ 4 or more

Bathrooms (Select Minimum) ☐ 1 ☐ 2 ☐ 3 ☐ 4 or more

Lot (Select all that apply) ☐ 0 - .5 Acres ☐ 2.5 - 5 Acres ☐ .5 - 1 Acres

☐ 1 - 2.5 Acres ☐ 2.5 - 5 Acres ☐ 5 - 10 Acres

☐ 10 - 20 Acres ☐ 20+ Acres

☐ View ☐ Waterfront ☐ Flat

☐ Wooded ☐ Pasture ☐ Irrigated

Indoor Amenities (Select all that apply)

☐ Fireplace(s) ☐ Formal Dining Room

☐ Walk-in Closets ☐ Security System

☐ Central Heating/AC ☐ Vaulted Ceilings

☐ Great Room ☐ 1st Floor Master Bedroom

☐ _____
☐ _____

Outdoor Amenities (Select all that apply)

☐ Pool ☐ Garden Area ☐ Spa/Jacuzzi

☐ Pond ☐ Patio/Deck ☐ Porch

Desired Outbuildings

☐ Barn ☐ Shed ☐ Guest House

☐ RV Barn ☐ Gazebo ☐ Shop

Other Needs and Wants

Name 3 Features/Amenities You Have Enjoyed In Previous Residences

1. _____
2. _____
3. _____

What is the one thing you can't live without in your next home?

Household Information

Help Us Get to Know You

**** I will not share your information with anyone. All information is for my own use.**

Name: _____ Nickname: _____

Birthday: _____

Spouse (Or Significant Other): _____ Nickname: _____

Anniversary Date: _____ Birthday: _____

Mailing Address: _____

Email Address: _____

Do you mind if we email you at this email address?(circle one)

Ye	No
S	

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Fax: _____ How would you prefer

we communicate with you? (circle preferences) Email Home Phone Work Phone Cell Phone

What is the best time of day to reach you? _____

Children's Names and Birthdays:

1. _____ 2. _____

3. _____ 4. _____

Pets

Dogs?(circle one) Yes No Name(s) _____

Cats? (circle one) Yes No Name(s) _____

Other _____

Favorite Restaurant(s)? _____

Favorite Activities/Hobbies? _____

Previous cities and states you have lived in: _____
