## **Time Real Estate Client Information**

Client Information	
Name:	
Address:	
City:	
State/Region/Province:	Postal Code:
Phone:	Mobile:
Email:	
Reason for Buying / Selling :	
Selling: Current Property Information	
Estimated Property Listing Price : \$	
Client Must Sell By:	
Home Style: Single Family Home Co	ondo/Town Home
Number of Bedrooms: Number of Bedrooms	aths Square Footage
☐ Buying: Desired Property Information	
Price Range: \$	
Estimated Down Payment: \$	Desired Monthly Payment: \$
Preferred Style: Single Family Home	Condo/Town Home  Other
Number of Bedrooms: Number of Bedrooms	aths Square Footage
Familiar with the area? Preferred Ar	ea
School Requirements:	
Additional Requirements:	