

# Buyer Contact Information

LOGO

PHOTO

Date: \_\_\_\_\_

First Name	Last Name	MI

**Current Address:**     Rent                       Own


Type	Area	Phone Number
	(    )	
	(    )	

**Source:**

- ◇ Phone Duty
- ◇ Open House
- ◇ Past Client
- ◇ SOI
- ◇ Referral: \_\_\_\_\_ Fee \_\_\_\_\_
- ◇ Other: \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Contact Method:** \_\_\_\_\_

Consumer Notice: \_\_\_\_\_

Buyer Agency: \_\_\_\_\_

Written Offer: \_\_\_\_\_ Accepted?  Y  N

Written Offer: \_\_\_\_\_ Accepted?  Y  N

## WANTS AND NEEDS

House features	Need	Want	Doesn't Matter
No of bedrooms			
No of bathrooms			
Master bedroom/ suite			
Dining room			
Living room			
Family room			
Den / office			
Eat-in-kitchen			
Updated kitchen			
Fireplace			
Basement			
Finished basement			
Rental suite			
Storage space			
Garage			
Carport			
Deck or patio			
Security system			
Swimming pool			
Wood floors			
Character			
Updated heating			
Updated wiring			
Updated plumbing			

**Area(s):**

New \_\_\_\_\_                      Resale \_\_\_\_\_

Single-family home                      Condominium \_\_\_\_\_

Age of home: \_\_\_\_\_

Square footage: \_\_\_\_\_

Style of house: \_\_\_\_\_

Lot size: small: \_\_\_ medium \_\_\_ large \_\_\_

School District: \_\_\_\_\_

**Auto e-mail?**     Y     N

**Mls Search Criteria:**

**Additional Wants:**

**Additional Don't Want:**

### Financing

<b>Desired Purchase price:</b>	<b>Name</b>	<b>Employer</b>	<b>Income</b>
<b>Desired Monthly payment:</b>			
<b>Pre-approval Amount:</b>			
<b>Down Payment:</b>	<b>Lender Info:</b> Did approval? <input type="checkbox"/> Y <input type="checkbox"/> N Name: _____ Mortg App? <input type="checkbox"/> Y <input type="checkbox"/> N  Company: _____ Referred by me? <input type="checkbox"/> Y <input type="checkbox"/> N  Phone: _____ Fax: _____  E-mail: _____		
<b>Closing Cost Money:</b>			

### Follow Up

Date	Time	Method	Comments

### Properties Shown

Property Info	Comments
Date: _____ Time: _____ MLS: _____ Price: _____ Address: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
Date: _____ Time: _____ MLS: _____ Price: _____ Address: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
Date: _____ Time: _____ MLS: _____ Price: _____ Address: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
Date: _____ Time: _____ MLS: _____ Price: _____ Address: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe
Date: _____ Time: _____ MLS: _____ Price: _____ Address: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe