



HOME BUYERS' QUESTIONNAIRE

Please complete the following questionnaire and return it to us as soon as possible. Exchanging this information prior to seeing properties helps us find exactly the right home for you. In addition to relating the physical requirements you want in your desired home, this questionnaire will help clarify what's really important to you – the style and values that affect the choice of the home you purchase.

FAMILY INFORMATION:

Name _____ Spouse/Partner _____
Address _____ Zip _____
Home Phone _____ Home Fax _____

Where are you employed? _____
Work Phone _____ Fax _____
E.mail _____ Cell Phone _____

Where is your spouse/partner employed? _____
Work Phone _____ Fax _____
E.mail _____ Cell Phone _____

Please mark your preferred method of communication: phone ___ fax ___ mail ___ e.mail ___
May we call you at work? _____

How many are in your family?
Name _____ Age _____
Name _____ Age _____
Name _____ Age _____
Name _____ Age _____

Why are you moving? _____

Personal interests and hobbies _____

LOCATIONS & NEIGHBORHOODS OF INTEREST:

Are there particular areas in the city that you prefer? _____
Describe the look and feeling of that area _____

What is the maximum amount of time you are willing to spend driving to and from work? _____
Are schools important to you? _____
If so, do you prefer a particular school area or school district? _____

HOME FEATURES DESIRED:

Range of total square footage _____
Bedrooms _____ Used for Office? _____ Guests? _____ Other use? _____
Baths _____
Please describe home styles or eras that you like _____

Now, please describe home styles or eras that you dislike _____

Please describe how you would use a:

- Formal or informal eating area _____
- Family room _____
- Second rec/family/bonus room _____
- Basement _____
- Garage _____
- Hobby area _____
- Extra parking area _____
- Extra storage area _____

HOME SETTING - Please rank the importance of the following characteristics:

- Lot size _____ Privacy _____
- Trees _____ Yard _____ Garden _____
- View _____ Light _____ Open feel _____
- Other considerations _____

CURRENT HOME:

What do you like the best about your current home? _____
The least? _____
What do you hope to accomplish by moving? _____

Do you own your current home or are you renting? _____
Would you prefer selling your home prior to buying? _____
Is your home listed for sale? _____
Do you need to know the market value of your current home? _____
How did you find your last home? _____

FINANCIAL MATTERS:

What price range do you have in mind? _____
How much cash do you want to use for the purchase? _____
How much has a lender told you that you're qualified to borrow? _____
What is the name of the lender? _____
Do you have a budget for monthly payments? _____
Do you need to sell your home before you buy another? _____

TIME FRAME:

When do you need or want to move into your new home? _____
Why? _____
How long have you been looking? _____
Have you seen any homes that you really liked? _____
If yes, what kept you from buying? _____

GENERAL:

What times are generally best for you to visit prospective homes? _____

What are your favorite Web Sites to view property? _____
Will anyone else help you make the decision about buying? _____
What Realtor services have you found particularly valuable in the past? _____

Are there any other requirements, large or small, you have of us? _____

Please contact us with any questions.

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