



Getting to know you and your next home.



As a Weichert® agent, I am committed to getting to know you personally so that I may be of greatest value to you. At this meeting, I'd like to take the time to find out more about you, and what you need and desire in your new home.

Invite us in. We'll bring results.®

Weichert
Realtors

16511012

Buyer(s) Profile

Date: _____

Buyer 1 Name: _____

Buyer 2 Name: _____

Buyer's Address: _____

Cell Phone: _____

Home Phone: _____

Work Phone: _____

Email Address: _____

Other Phone: _____

Other Email: _____

Buyer(s) Motivation

Why are you moving? _____

Time frame: _____

Town and reasons: _____

What is most important to you in this move? _____

Own: _____ Rent: _____ Pets: Yes _____ No _____

If you currently own:

Will it be necessary to sell your home to buy the next one? Yes _____ No _____

Is your current home on the market? Yes _____ No _____

If you are currently renting:

When does your lease expire? _____

Financing status:

Have you been pre-approved for a mortgage? Yes _____ No _____

If yes, name the mortgage company _____

Additional Notes

New Home Profile

Style: Colonial Ranch Bi-Level Split Cape Cod Condo Townhouse Co-Op

of Bed Rooms: _____ # of Baths: _____ Property Size: _____

Other: _____ Price Range: _____

Desired Features	Locations of Interest	Schools Needed	Commuting Needs	Shopping Needs
<input type="checkbox"/> Eat-In Kitchen <input type="checkbox"/> Dining Room <input type="checkbox"/> Living Room <input type="checkbox"/> Family Room <input type="checkbox"/> Deck <input type="checkbox"/> Patio <input type="checkbox"/> Porch <input type="checkbox"/> Finished Basement <input type="checkbox"/> Garage <input type="checkbox"/> Fireplace <input type="checkbox"/> Central A/C <input type="checkbox"/> Septic OK? <input type="checkbox"/> Well OK? Other Amenities:	<input type="checkbox"/> Towns <input type="checkbox"/> Developments <input type="checkbox"/> Other	<input type="checkbox"/> Day Care <input type="checkbox"/> Pre K <input type="checkbox"/> Elementary <input type="checkbox"/> Middle School <input type="checkbox"/> High School <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Other Notes:	<input type="checkbox"/> Walking Distance <input type="checkbox"/> Car <input type="checkbox"/> Highways <input type="checkbox"/> Bus <input type="checkbox"/> Train <input type="checkbox"/> Other Max Time _____ Max Dist. _____ Notes:	<input type="checkbox"/> Convenience Stores <input type="checkbox"/> Food Stores <input type="checkbox"/> Shopping Mall <input type="checkbox"/> Outlets <input type="checkbox"/> Other Notes:

Additional Notes
