

BUYERS QUESTIONNAIRE



Personal Information

Name(s): _____

Tell me about your housing needs:

Current Address: _____ City: _____ State: _____ Zip: _____

Preferred Communication:

Home Phone: _____ Work: _____ Cell: _____ Email: _____

What is your mailing address? _____

Location

Desired Area(s): _____

Price: \$ _____ to \$ _____

Motivation

Motivation Level: (low) 1 2 3 4 5 (high)

Do you currently Own Rent; Lease Expires: _____ Rent Amount \$ _____

If own, is house on the market? Yes No

If yes, are they buying with that agent? Yes No

If own, is listing sheet filled out? Yes No

If no, why not? _____

Time Frame: _____ Lead Status (Time Frame): A B C

BUYER QUESTIONNAIRE (continued)

Working With Another Agent

Yes No

If yes, is there a signed agreement? Yes No

What are three things you are looking for in an agent?

1. _____

2. _____

3. _____

Mortgage

Will the buyer be paying cash? Yes No

Has the buyer been Prequalified OR Preapproved by a lender?

If no, do they require a lender referral? Yes No If Yes, referred to : _____

Home Criteria

Bedrooms: _____ # Bathrooms: _____ # Living: _____ # Dining: _____ # Garage(s): _____

Stories: _____ Sq. Ft.: _____ Lot Size: _____ Age of Home: _____ Style: _____

Special Needs | Must Haves:

Type of Home: _____

Close for the Buyer Consultation

Best time for the Buyer Consultation Appointment: Day Night Weekday Weekend

Appointment Set (Date, Time & Location): _____

SCRIPT: "Great! Let me take a moment to make sure I have all the information I need."

Notes:

