## **BUYER NEEDS ASSESSMENT WORKSHEET**

Name(s)								
Current								
Phone Numbers:	Home: Work: Mobile:		Home: _ Work: _ Mobile:					
Fax Numbers:								
E-Mail:								
Preferred contact	Phone: Mobile			-				
Family size:			Pets:	_				
Currently: 🗆 Own		□ Rent	☐ Must sell to purchase?					
Desired possession date								
Mortgage: □ Prequalified □ Pre-approved								
Lender:				-				
deal Price: Ideal Monthly Payment:								
Ideal Location: _								

## Accredited Buyer's Representative Official Designation Course

# of Bedrooms:			# of Bathrooms: Minimum:				
Lot size:							
Garage: How	many vehicle	s?					
_	Boat □ Camper						
Age of home:		Style:					
☐ Eat-in kitchen	☐ Finished b	pasement	Special requir	rements			
☐ Separate dining room	☐ Fenced yard		☐ Day care facilities				
☐ Family room	☐ Deck/patio		☐ Elder care				
☐ Fireplace	□ Pool		☐ Cultural activities				
☐ Workshop	☐ Waterfront		☐ School requirements				
☐ Home office			☐ Sports/recreation				
☐ Home business			☐ Public transportation				
The ideal home:							
How long have you been	looking for a h	ome?					
How have you been looki	ng?						
Did you see anything you	liked?						
What kept you from buyi	ng it?						
Have any agents shown yo	ou homes?						
What was your relationsh	ip with the age	ent?					
What did you sign with th	What did you sign with the agent?						
If we cannot find everyth consider compromising	-	ce range and lo	cation you want, wh	at would you			
Are some features "deal b							