



Residential Property Questionnaire

Agent Name: _____

Owners' Name(s): _____

Property Address: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Fax: _____

Property

Lot: _____ Block: _____ House Style: _____

Year Built: _____ How long owned? _____

Taxes: _____ Tax Year: _____

Lot Square Footage: _____ Square footage of Home (approx): _____

Knowledge of Builder: _____

Total # of Bedrooms: _____

Total # of Full Bathrooms: _____ Total # of Half Bathrooms: _____

Exterior

Siding ~ Type: _____

Roof ~ Type: _____

Windows ~ Type: _____

Foundation ~ Type: _____

Doors ~ Type: _____

Gutters/Leaders: _____

Other: _____

Foyer

Dimensions: _____ Level: _____

- | | |
|---|---|
| <input type="checkbox"/> Beamed Ceiling | <input type="checkbox"/> Coat Closet |
| <input type="checkbox"/> Cathedral Ceiling | <input type="checkbox"/> Double-door Entry |
| <input type="checkbox"/> Ceiling Fan | <input type="checkbox"/> Flooring ~ Type: _____ |
| <input type="checkbox"/> Chair-rail Molding | <input type="checkbox"/> Lighting ~ Type: _____ |
| <input type="checkbox"/> Crown Molding | <input type="checkbox"/> Two-Story |

Other: _____

Powder Room

Dimensions: _____ Level: _____

- | | |
|---|---|
| <input type="checkbox"/> Pedestal Sink | <input type="checkbox"/> Fixtures ~ Type: _____ |
| <input type="checkbox"/> Vanity Sink | <input type="checkbox"/> Lighting ~ Type: _____ |
| <input type="checkbox"/> Flooring ~ Type: _____ | |

Other: _____

Living Room

Dimensions: _____ Level: _____

- | | |
|---|--|
| <input type="checkbox"/> Cathedral Ceiling | <input type="checkbox"/> Pocket Doors |
| <input type="checkbox"/> Ceiling Fan | <input type="checkbox"/> Recessed Lighting |
| <input type="checkbox"/> Chair-rail Molding | <input type="checkbox"/> Skylight |
| <input type="checkbox"/> Crown Molding | <input type="checkbox"/> Sliding Doors |
| <input type="checkbox"/> Built-in Cabinets | <input type="checkbox"/> Wood Floors |
| <input type="checkbox"/> Overhead Lighting | <input type="checkbox"/> Carpeting |
| <input type="checkbox"/> Access to Deck/Patio | <input type="checkbox"/> Wet Bar |
| <input type="checkbox"/> Dining Area | <input type="checkbox"/> Built-ins |
| <input type="checkbox"/> French Doors | |
| <input type="checkbox"/> Fireplace ~ Wood: _____ Gas: _____ | |

Other: _____

Dining Room

Dimensions: _____ Level: _____

- | | |
|---|--|
| <input type="checkbox"/> Cathedral Ceiling | <input type="checkbox"/> Closet |
| <input type="checkbox"/> Ceiling Fan | <input type="checkbox"/> French Doors |
| <input type="checkbox"/> Chair-rail Molding | <input type="checkbox"/> Pocket Doors |
| <input type="checkbox"/> Crown Molding | <input type="checkbox"/> Recessed Lighting |
| <input type="checkbox"/> Built-in Cabinets | <input type="checkbox"/> Skylight |
| <input type="checkbox"/> Overhead Lighting | <input type="checkbox"/> Wood Floor |
| <input type="checkbox"/> Sliding Door | <input type="checkbox"/> Wet Bar |
| <input type="checkbox"/> Access to Deck/Patio | <input type="checkbox"/> Built-ins |
| <input type="checkbox"/> Fireplace ~ Wood: _____ Gas: _____ | |

Other: _____

Family/Rec Room

Dimensions: _____ Level: _____

- | | |
|---|---|
| <input type="checkbox"/> Cathedral Ceiling | <input type="checkbox"/> French Doors |
| <input type="checkbox"/> Ceiling Fan | <input type="checkbox"/> Recessed Lighting |
| <input type="checkbox"/> Chair-rail Molding | <input type="checkbox"/> Overhead Lighting |
| <input type="checkbox"/> Crown Molding | <input type="checkbox"/> Skylight |
| <input type="checkbox"/> Closet | <input type="checkbox"/> Flooring ~ Type: _____ |
| <input type="checkbox"/> Access to Deck | <input type="checkbox"/> Built-ins |
| <input type="checkbox"/> Fireplace ~ Wood: _____ Gas: _____ | |

Other: _____

Den/Study

Dimensions: _____ Level: _____

- | | |
|---|---|
| <input type="checkbox"/> Ceiling Fan | <input type="checkbox"/> Recessed Lighting |
| <input type="checkbox"/> Chair-rail Molding | <input type="checkbox"/> Overhead Lighting |
| <input type="checkbox"/> Crown Molding | <input type="checkbox"/> Flooring ~ Type: _____ |
| <input type="checkbox"/> Closet | <input type="checkbox"/> Built-ins |
| <input type="checkbox"/> Fireplace ~ Wood: _____ Gas: _____ | |

Other: _____

Sun Room

Dimensions: _____ Level: _____

- | | |
|---|---|
| <input type="checkbox"/> Cathedral Ceiling | <input type="checkbox"/> Outdoor Access |
| <input type="checkbox"/> Ceiling Fan | <input type="checkbox"/> Recessed Lighting |
| <input type="checkbox"/> Chair-rail Molding | <input type="checkbox"/> Overhead Lighting |
| <input type="checkbox"/> Crown Molding | <input type="checkbox"/> Skylight |
| <input type="checkbox"/> Closet | <input type="checkbox"/> Flooring ~ Type: _____ |
| <input type="checkbox"/> Access to Deck/Patio | <input type="checkbox"/> Built-ins |
| <input type="checkbox"/> French Doors | |
| <input type="checkbox"/> Fireplace ~ Wood: _____ Gas: _____ | |

Other: _____

Kitchen

Dimensions: _____ Level: _____

- Cathedral Ceiling
 - Ceiling Fan
 - Cabinets ~ Type: _____ Color: _____
 - Countertops ~ Type: _____
 - Overhead Lighting
 - Recessed Lighting
 - Center Island
 - Flooring ~ Type: _____
 - Skylight
 - Access to Deck/Patio
 - Eating Area ~ Table Space
 - Range ~ Gas: _____ Electric: _____ Brand: _____
 - Exhaust Fans ~ Type: _____
 - Oven ~ Brand: _____ Wall Double
 - Dishwasher ~ Brand: _____
 - Refrigerator ~ Brand: _____
 - Disposal ~ Brand: _____
 - Microwave ~ Built-in: _____ Brand: _____
 - Trash Compactor
 - Wine Cooler
 - Sink ~ Single: _____ Double: _____
 - Pantry
 - Sliding Doors to: _____
 - Flooring ~ Type: _____
- Other: _____
-

Bedroom #1 (Owners)

Dimensions: _____ Level: _____

 Bath

Sink ~ Double: _____ Sink: _____

Flooring ~ Type: _____

Tub: _____ Oversized: _____ Whirlpool: _____

Separate Shower: _____ Shower Doors: _____

Cabinetry ~ Type: _____

Bidet

Fixtures ~ Type: _____

 Cathedral Ceiling Ceiling Fan Crown Molding Closet Overhead lighting Dressing Area Fixed Mirrors Sitting Room Wet Bar Fireplace ~ Wood: _____ Gas: _____

Other: _____

 Pocket Doors Recessed Lighting Built-in Shelves Window Treatments Skylight Private Entrance Wood Floor Carpeting**Bedroom #2**

Dimensions: _____ Level: _____

 Bath Cathedral Ceiling Ceiling Fan Crown Molding Closet Overhead Lighting Dressing Area Fixed Mirrors Sitting Room Fireplace ~ Wood: _____ Gas: _____

Other: _____

 Pocket Doors Recessed Lighting Built-in Shelves Window Treatments Skylight Private Entrance Wood Floor Carpeting Wet Bar

Bedroom #3

Dimensions: _____ Level: _____

- | | |
|---|--|
| <input type="checkbox"/> Bath | <input type="checkbox"/> Pocket Doors |
| <input type="checkbox"/> Cathedral Ceiling | <input type="checkbox"/> Recessed Lighting |
| <input type="checkbox"/> Ceiling Fan | <input type="checkbox"/> Built-in Shelves |
| <input type="checkbox"/> Crown Molding | <input type="checkbox"/> Window Treatments |
| <input type="checkbox"/> Closet | <input type="checkbox"/> Skylight |
| <input type="checkbox"/> Overhead Lighting | <input type="checkbox"/> Private Entrance |
| <input type="checkbox"/> Dressing Area | <input type="checkbox"/> Wood Floor |
| <input type="checkbox"/> Fixed Mirrors | <input type="checkbox"/> Carpeting |
| <input type="checkbox"/> Sitting Room | <input type="checkbox"/> Wet Bar |
| <input type="checkbox"/> Fireplace ~ Wood: _____ Gas: _____ | |

Other: _____

Bedroom #4

Dimensions: _____ Level: _____

- | | |
|---|--|
| <input type="checkbox"/> Bath | <input type="checkbox"/> Pocket Doors |
| <input type="checkbox"/> Cathedral Ceiling | <input type="checkbox"/> Recessed Lighting |
| <input type="checkbox"/> Ceiling Fan | <input type="checkbox"/> Built-in Shelves |
| <input type="checkbox"/> Crown Molding | <input type="checkbox"/> Window Treatments |
| <input type="checkbox"/> Closet | <input type="checkbox"/> Skylight |
| <input type="checkbox"/> Overhead Lighting | <input type="checkbox"/> Private Entrance |
| <input type="checkbox"/> Dressing Area | <input type="checkbox"/> Wood Floor |
| <input type="checkbox"/> Fixed Mirrors | <input type="checkbox"/> Carpeting |
| <input type="checkbox"/> Sitting Room | <input type="checkbox"/> Wet Bar |
| <input type="checkbox"/> Fireplace ~ Wood: _____ Gas: _____ | |

Other: _____

Bedroom #5

Dimensions: _____ Level: _____

- | | |
|---|--|
| <input type="checkbox"/> Bath | <input type="checkbox"/> Pocket Doors |
| <input type="checkbox"/> Cathedral Ceiling | <input type="checkbox"/> Recessed Lighting |
| <input type="checkbox"/> Ceiling Fan | <input type="checkbox"/> Built-in Shelves |
| <input type="checkbox"/> Crown Molding | <input type="checkbox"/> Window Treatments |
| <input type="checkbox"/> Closet | <input type="checkbox"/> Skylight |
| <input type="checkbox"/> Overhead Lighting | <input type="checkbox"/> Private Entrance |
| <input type="checkbox"/> Dressing Area | <input type="checkbox"/> Wood Floor |
| <input type="checkbox"/> Fixed Mirrors | <input type="checkbox"/> Carpeting |
| <input type="checkbox"/> Sitting Room | <input type="checkbox"/> Wet Bar |
| <input type="checkbox"/> Fireplace ~ Wood: _____ Gas: _____ | |

Other: _____

Hall Bath

Dimensions: _____ Level: _____

- Sink ~ Double: _____ Sink: _____
 - Ceramic
 - Flooring ~ Type: _____
 - Tub: _____ Oversized: _____ Whirlpool: _____
 - Separate Shower: _____ Shower Doors: _____
 - Cabinet
 - Bidet
 - Fixtures ~ Type: _____
 - Other: _____
-

Attic

Dimensions: _____

- Access ~ Where and How? _____
 - Attic Fan
 - Floored
 - Height: _____
 - Insulation
 - Storage
 - Other: _____
-

Basement

Dimensions: _____

- Full: _____ Partial: _____ Crawl: _____ Slab: _____
 - Finished Unfinished
 - Laundry ~ Dimensions: _____
Washer ~ Brand: _____ Dryer ~ Brand: _____
 - Workroom ~ Dimensions: _____
 - Access to Outside
 - Additional Room
 - Bathroom ~ Full Half
 - Dampness/Water History: _____
 - Waterproofed
 - Other: _____
-

Systems

- Primary Heating Fuel: _____ Zones: _____ Brand: _____
- Air Conditioning ~ Type: _____ Zones: _____ Brand: _____
 - Humidifier ~ Brand: _____
 - Water Heater ~ Type: _____ Brand: _____ Capacity: _____
 - Water Conditioner
 - Sump Pump
 - Radon Mitigation System
 - Electrical System ~ Wiring Type: _____
 - Panel Location
 - Plumbing Type
 - Security System ~
Brand: _____ Monitoring: _____ Motion: _____
 - Smoke/Fire Detectors
 - Intercom
 - Sound System ~ Rooms Served: _____
 - Central Vacuum
- Other: _____
-

Grounds

- Driveway ~ Type: _____
 - Walkways ~ Type: _____
 - Landscaping
 - Specimen Plantings
 - Underground Objects
 - Outbuildings
 - Sheds
 - Pool ~ Type: _____ Age: _____
 - Tennis Court
 - Hot Tub ~ Type: _____
 - Deck
 - Patio
 - Porch ~ Screened: _____
 - Underground Sprinkler
 - Fence
- Other: _____
-

Utilities

Water ~ Well Public

Sewage ~ Septic Public

Cable TV Satellite Dish ~ Brand: _____

Other: _____

Parking

Garage ~ Number of Cars: _____

Detached

Automatic Garage Door Openers

Storage Area

Insulated

Finished

Heated

Carport ~ Number of Cars: _____

Off-Street

Assigned Space(s) ~ How many: _____

Other: _____
