

Buyer Needs Assessment Worksheet

Name(s)		
Current Address:		
Phone Numbers:	Home: _____ Work: _____ Mobile: _____	Home: _____ Work: _____ Mobile: _____
Fax Numbers:		
E-Mail:		
Preferred contact method(s):	<input type="checkbox"/> Phone: _____ <input type="checkbox"/> Mobile _____ <input type="checkbox"/> E-mail: _____	

Family size: _____ Pets: _____

Currently: Own Rent Must sell to purchase?

Desired possession date _____

Mortgage: Prequalified Pre-approved

Lender: _____

Ideal Price: _____ Ideal Monthly Payment: _____

Ideal Location: _____

of Bedrooms: _____

Minimum: _____

Lot size: _____

of Bathrooms: _____

Minimum: _____

Garage: _____ How many vehicles? _____

Parking Space: Boat Camper Bus/truck _____



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Style: _____