

Buyer Consultation CHECKLIST

Buyers Legal Names

Buyer 1: _____

Buyer 2: _____

(should match driver's license)

Buyers Contact Information

Address: _____

Phone: _____

Email: _____

Preferred method of contact: _____

Marital History

Marriage? Yes No

If yes, Spouse's Name: _____

Date of Marriage: ____ / ____ / ____

How will Title be held?

Mail Out? Yes No

Power of Attorney? Yes No

Does buyer have a valid driver's license?

Yes No

Has buyer secured funds for closing?

Yes No

Does buyer have a pre-approval letter or proof of funds? Yes No

Lender's Contact Information

Name: _____

Company: _____

Phone : _____

Email: _____

Property Must Haves

Square-footage range: _____

Beds: _____

Baths: _____

Garage: _____

Other must haves

Property Wants

Things to review prior to contract

Buyer's Rep Agreement

Broker Compliance Docs

IABS

Earnest Money and Option Fee payable to the title company

Buyer estimated costs

others:

NOTES:

