

Buyer's Wishlist – Strata Homes

This form can help you start to flush out your ideal home and neighbourhood. We will build on this together. When filling out the form, it may help to think of what you like and dislike about your current home. If you have no preference, please leave the section blank.

Name(s): _____ Date: _____

Address: _____

Telephone: _____ Email: _____

Home Features

Type <input type="checkbox"/> condo <input type="checkbox"/> loft <input type="checkbox"/> penthouse <input type="checkbox"/> townhouse	
Bedrooms <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	Bathrooms <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4
Den <input type="checkbox"/> yes <input type="checkbox"/> no	
Size min _____ sqft max _____ sqft	Parking <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
Storage locker <input type="checkbox"/> yes <input type="checkbox"/> no	
Home age (years) <input type="checkbox"/> <5 <input type="checkbox"/> 5-10 <input type="checkbox"/> 10-20 <input type="checkbox"/> 20+	Construction <input type="checkbox"/> lowrise concrete <input type="checkbox"/> highrise concrete <input type="checkbox"/> wood
Floor (groundfloor, 1st, 2nd etc) min ____ floor max ____ floor	Mobility Stairs <input type="checkbox"/> yes <input type="checkbox"/> no Elevator <input type="checkbox"/> yes <input type="checkbox"/> no
Condition <input type="checkbox"/> fix 'er upper <input type="checkbox"/> minor repairs <input type="checkbox"/> cosmetic improvements <input type="checkbox"/> move in ready	
Outdoor space <input type="checkbox"/> yard <input type="checkbox"/> patio <input type="checkbox"/> balcony	Sun exposure <input type="checkbox"/> morning <input type="checkbox"/> afternoon
Features <input type="checkbox"/> washer/dryer <input type="checkbox"/> dishwasher <input type="checkbox"/> air conditioning <input type="checkbox"/> fireplace other: _____	
Building amenities <input type="checkbox"/> pool <input type="checkbox"/> gym <input type="checkbox"/> lounge <input type="checkbox"/> concierge	View <input type="checkbox"/> water <input type="checkbox"/> mountains <input type="checkbox"/> city
Bylaw restrictions Pets <input type="checkbox"/> yes <input type="checkbox"/> no Rentals <input type="checkbox"/> yes <input type="checkbox"/> no Resident age <input type="checkbox"/> yes <input type="checkbox"/> no	

Neighbourhood

Preferred neighbourhood (complete this if you already know where you want to live)

Coal Harbour Crosstown Downtown False Creek

Gastown West End Yaletown other: _____

Neighbourhood vibe

younger older quieter active edgier

Amenities and entertainment

shopping restaurants cafes bars theatres parks beach

seawall medical worship daycare playground preschool

Education

university college language school high school elementary

Financing

Budget min \$_____ max \$_____	Are you preapproved for a mortgage? <input type="checkbox"/> yes <input type="checkbox"/> no
How much money do you have for your downpayment? \$_____	

Schedule

When do you want to move into your new home? _____

How long will you live in your new home? _____

Comments

Please email jason@my604home.com or fax 604.689.5665 me your form.