



**Anything Less is Second Best**

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**Grey Bruce Realty Inc., Brokerage**  
Locally Owned & Independently Operated

## Home Buyers Checklist Page 1

Address			
Type of Home:	<input type="checkbox"/> Detached <input type="checkbox"/> Semi Detached <input type="checkbox"/> Condo <input type="checkbox"/> Row House	<input type="checkbox"/> TownHouse <input type="checkbox"/> Multi-Unit <input type="checkbox"/> Residential <input type="checkbox"/> Commercial	
Age of Home:			
Asking Price:			
Previous Sale Price:			
Property Taxes:			
Heating:	<input type="checkbox"/> Gas <input type="checkbox"/> Oil	<input type="checkbox"/> Wood <input type="checkbox"/> Electric	
Date Listed:			
Occupancy Date:			
Approx. Square Footage:			
Size of Lot::	L x W= _____ Frontage _____	Area= _____	
Number of Bedrooms			
Number of Bathrooms			
Finished Basement:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Partial		
Attached Garage/Carport	<input type="checkbox"/> Garage <input type="checkbox"/> Carport <input type="checkbox"/> Single <input type="checkbox"/> Dbl		
Parking Areas:	<input type="checkbox"/> Garage <input type="checkbox"/> Driveway <input type="checkbox"/> Street		
Fireplace	<input type="checkbox"/> Gas <input type="checkbox"/> Wood <input type="checkbox"/> Oil <input type="checkbox"/> None		
Air Conditioning:	<input type="checkbox"/> Central Air <input type="checkbox"/> Window <input type="checkbox"/> None		
Exterior Deck or Patio	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Wood <input type="checkbox"/> Conc		
Pool	<input type="checkbox"/> In Ground <input type="checkbox"/> Above Ground		
Fence	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Security System	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Age of Roof-If Known			
Number of Stories			
Encroachments:			

## Home Buyers Checklist Page 2

<b>The Neighbourhood</b>	
Distance from work:	
Distance from Schools:	<input type="checkbox"/> Bussing Req'd
Neighbourhood:	<input type="checkbox"/> Families <input type="checkbox"/> Adults <input type="checkbox"/> Seniors
Distance to Shopping:	
Distance to Banking:	
Public Transportation:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Traffic Volume on Street	<input type="checkbox"/> Light <input type="checkbox"/> Moderate <input type="checkbox"/> Heavy
Condition of Street:	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor
Is There Street Lighting:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Surrounding Properties:	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Run Down
Cable Television:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Satellite
High Speed Internet:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Distance to Public Parks:	
Negative Features:	
Positive Features:	
Notes:	
<b>Exterior of House</b>	
General Condition	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor
Type of Construction:	
Driveway Type	<input type="checkbox"/> Asphalt <input type="checkbox"/> Concrete <input type="checkbox"/> Other
Driveway Condition	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor
Exterior Electrical- GFI's	<input type="checkbox"/> Yes <input type="checkbox"/> No
Outside Faucets	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Frost proof
Outside Lighting	<input type="checkbox"/> Yes <input type="checkbox"/> No
Direction Front Facing	<input type="checkbox"/> N <input type="checkbox"/> S <input type="checkbox"/> E <input type="checkbox"/> W
Roof Appearance	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Needs Repair
Overall Appearance	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Needs Work
General Landscaping	<input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Needs TLC
Any Out Buildings	
Notes:	

# Home Buyers Checklist

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Inside the Home			
Smell	<input type="checkbox"/> Clean	<input type="checkbox"/> Musty	<input type="checkbox"/> Air Freshener
General Cleanliness	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Front Door Lock	<input type="checkbox"/> Keyed Knob	<input type="checkbox"/> Deadbolt	<input type="checkbox"/> Other
Types of Flooring	<input type="checkbox"/> Hardwood		<input type="checkbox"/> Carpet
	<input type="checkbox"/> Vinyl		<input type="checkbox"/> Ceramic
Condition of Floors:	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Type of Interior Walls	<input type="checkbox"/> Plaster	<input type="checkbox"/> Drywall	<input type="checkbox"/> Panelling
Condition of Walls:	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Condition of Ceilings	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Kitchen Cabinet Space	<input type="checkbox"/> Plentiful	<input type="checkbox"/> Average	<input type="checkbox"/> Not Enough
Type of Cabinets	<input type="checkbox"/> Stained	<input type="checkbox"/> Painted	<input type="checkbox"/> Melamine
Condition of Cabinets	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Condition of Counters	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Built in Dishwasher	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Appliances Included(list)			
Closets & Storage	<input type="checkbox"/> Plentiful	<input type="checkbox"/> Average	<input type="checkbox"/> Not Enough
Light Fixtures-Condition	<input type="checkbox"/> Old	<input type="checkbox"/> New	<input type="checkbox"/> Need Replaced
Central Vac	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Windows	<input type="checkbox"/> Old		<input type="checkbox"/> Need Replaced
	<input type="checkbox"/> Single Glaze	<input type="checkbox"/> Thermo	<input type="checkbox"/> Storms
Conditioning of Wiring	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
From what can be seen	<input type="checkbox"/> Spool & Bobbin		
Electrical Service	<input type="checkbox"/> Fuse	<input type="checkbox"/> Breaker	<input type="checkbox"/> 100amp <input type="checkbox"/> 200amp
Water Supply	<input type="checkbox"/> Jet Pump	<input type="checkbox"/> Submersible	<input type="checkbox"/> Municipal
Hot Water	<input type="checkbox"/> Gas	<input type="checkbox"/> Oil	<input type="checkbox"/> Hydro
Is The Tank a Rental	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Any visible Mold/Mildew	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Is there a Full basement	<input type="checkbox"/> Crawl Space	<input type="checkbox"/> Full Basement	<input type="checkbox"/> Both
Any Visible Moisture	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Interior Decor	<input type="checkbox"/> Okay	<input type="checkbox"/> Needs work	<input type="checkbox"/> Major overhaul
Ceiling Fans-Included	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Interior Draperies	<input type="checkbox"/> Included	<input type="checkbox"/> Not Included	
Notes			

# Home Buyers Checklist

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Other Items			
Fence Condition	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor <input type="checkbox"/> N/A
Pool Condition (if applies)	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor <input type="checkbox"/> N/A
Condition of Decks	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor <input type="checkbox"/> N/A
Condition of Other Patios	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor <input type="checkbox"/> N/A
Large Trees- Condition	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor <input type="checkbox"/> N/A
Outbuildings- Condition	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor <input type="checkbox"/> N/A
Condition of Lawn/Grass	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor <input type="checkbox"/> N/A
Any ditches, creeks etc that could cause flooding	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Hydro Service	<input type="checkbox"/> Buried	<input type="checkbox"/> Overhead	
Sanitary System	<input type="checkbox"/> Septic	<input type="checkbox"/> Municipal	
Well Location and Depth			
Septic-Last Time Pumped			
Wood Burning Chimneys	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If Yes-last time checked
Is this a Termite Area?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Any signs of rats or mice	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Smoke detectors	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
C02 Detectors	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Wood Burning Appliance	<input type="checkbox"/> Yes	Inspections Required for Insurance	
Interior Draperies	<input type="checkbox"/> Included	<input type="checkbox"/> Not Included	
Water Softener	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Yard Sprinkler System	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Hot Tub or Spa Included	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Water Purifier System	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Eave troughs-Installed	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Smokers House	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
TV Antennas Included	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Yearly Expenses			
Heating Costs			
Hydro Costs			
Municipal Water Costs			
Municipal Garbage			
Cable TV or Satellite			
Snow Removal			
Other			

Notes: