

Date: Lead Source:					
Name:		Spouse Name:			
Property Address: City: _		State:		Zip:	
Phone #s – Mobile: Spouse Mobile:		Home:	v	Work:	
Email:		Spouse Email:			
Fam	nily / Children (include ages):				
1.	Have any other agents shown you homes? □ Yes □ No If Yes, do you have a signed agency agreement? □ Yes □ No				
2.					
	Are you renting, or do you own a home? Homeowne	er 🗆 Renter			
	a) HOMEOWNER:				
	● Do you need to sell your home before you buy? □ Yes □ No				
	• Have you signed a listing agreement to sell your home? Yes No If "No" use Seller Lead Sheet.				
	b) RENTER:				
4	When does your lease end?				
	What date do you want to be moved by? Are there any negatives to not moving by then? (suggest lifestyle sacrifices, job, costs, schools, family, etc.)				
5.	Are there any negatives to not moving by then? (sugges	st mestyle sacrifices, j	00, COSIS, SCHOOI	s, failing, etc.)	
6.	Tell me all the benefits of buying a new home: (dig deep & find out WHY?)				
7.	On a scale of 1 to 10, how would you rank your motivat				
	must buy as quickly as possible, and 1 meaning you're not sure you'll really buy anything:				
0	• What's missing? What would it take to make you	i a 10?			
	Do you know where you want to move to?				
	Will you be paying cash or getting a mortgage? Cash Mortgage				
	. Have you been pre-approved by a lender? □ Yes □ No How much will your down payment be?				
	2. What price range are you looking in?				
12 How many PP: Paths: Starios: Other:					
14. What else are you looking for in a home?					
15. Will anyone else be involved in your home buying decision?					
16. "Thank you! I'd love to help you find your perfect home. All that we need to do is to set an appointment so that					
	can help you find the home you're looking for. Does 4:30 tomorrow or 5:00 Wednesday work for you?"				
Appointment Date/Time:					
DI	DISC Behavioral Profile: Why?				