

# HOME INFORMATION



MARJORIE  
ADAM TEAM  
REALTORS

ADDRESS: \_\_\_\_\_

## UTILITIES

COMPANY		12-MONTH AVERAGE BILL
Electric		
Gas or Propane		
Water <input type="checkbox"/> Sewer <input type="checkbox"/>		

AGE OF SYSTEMS		SYSTEMS FUELED BY		ENERGY EFFICIENCY
Furnace or Heating		Heating & Cooling	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Electric <input type="checkbox"/> Dual Fuel	Solar: <input type="checkbox"/> YES <input type="checkbox"/> NO
Air Conditioning		Water Heater	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Electric	Pearl: <input type="checkbox"/> Platinum <input type="checkbox"/> Gold <input type="checkbox"/> Silver
Roof		Fireplace <input type="checkbox"/>	<input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Wood <input type="checkbox"/> Electric	HERS Score: _____
Windows				Earthcraft <input type="checkbox"/> YES <input type="checkbox"/> NO
				Other: _____

Number of HVAC zones: \_\_\_\_\_

Attic Storage: ☐ YES ☐ NO

## SCHOOLS

Elementary: \_\_\_\_\_ Middle: \_\_\_\_\_ High: \_\_\_\_\_

## HOMEOWNERS ASSOCIATION

HOA FEES	AMENITIES INCLUDED	OTHER AMENITIES
HOA <input type="checkbox"/> YES <input type="checkbox"/> NO Amount: _____ Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually	<input type="checkbox"/> Pool <input type="checkbox"/> Playground <input type="checkbox"/> Exercise Facility <input type="checkbox"/> Clubhouse <input type="checkbox"/> Tennis <input type="checkbox"/> Trash Pickup <input type="checkbox"/> Exterior Maintenance ( Roof <input type="checkbox"/> Siding <input type="checkbox"/> Deck <input type="checkbox"/> ) <input type="checkbox"/> Area Maintenance <input type="checkbox"/> Snow Removal <input type="checkbox"/> Yard Maintenance <input type="checkbox"/> Walking Trails <input type="checkbox"/> Lake/ Pond	_____ _____ _____ _____

TRASH PICKUP	YARD CARE
Included in HOA: <input type="checkbox"/> YES <input type="checkbox"/> NO Pick Up Day: _____ Provider: _____ Amount: _____	Included in HOA: <input type="checkbox"/> YES <input type="checkbox"/> NO Contracted Out: <input type="checkbox"/> YES <input type="checkbox"/> NO Provider: _____ RE_

TECHNOLOGY SERVICES	SECURITY SERVICE
TV Service: <input type="checkbox"/> Xfinity <input type="checkbox"/> Dish Network <input type="checkbox"/> Other _____ Telephone: <input type="checkbox"/> Xfinity <input type="checkbox"/> Verizon <input type="checkbox"/> Other _____ Internet: <input type="checkbox"/> Xfinity <input type="checkbox"/> Century Link <input type="checkbox"/> Other _____	<input type="checkbox"/> Active <input type="checkbox"/> Available but not active <input type="checkbox"/> No existing hardware Provider Name: _____ Provider Fee: _____ <input type="checkbox"/> Annually <input type="checkbox"/> Monthly

## RECORDING DEVICE(S) ON PREMISES

☐ YES ☐ NO

# PROPERTY RENOVATIONS AND IMPROVEMENTS



ADDRESS: \_\_\_\_\_

IMPROVEMENT/RENOVATION	COMPLETION DATE	ESTIMATED VALUE

## EXCLUSIONS/ NOT CONVEYING

### INTERIOR

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Refrigerator        | <input type="checkbox"/> Dining Room Fixture | <input type="checkbox"/> Home Theater Equipment |
| <input type="checkbox"/> Washer              | <input type="checkbox"/> Window Treatments   | <input type="checkbox"/> Flat Screen TV         |
| <input type="checkbox"/> Dryer               | <input type="checkbox"/> Curtain Rods        | <input type="checkbox"/> TV Mount               |
| <input type="checkbox"/> Workbench in Garage | <input type="checkbox"/> Bathroom Mirror(s)  | <input type="checkbox"/> _____                  |

### EXTERIOR

- |  |   |
|--|---|
| <input type="checkbox"/> Play Structure/Swingset | <input type="checkbox"/> Shed/Storage Structure |
| <input type="checkbox"/> Pool Equipment          | <input type="checkbox"/> _____                  |

