



Use our checklist as a guide to help you  
 Carry out a walkthrough checklist when viewing a property

**Exterior of the home**

- |  |                                |                                |
|--|--------------------------------|--------------------------------|
| <input type="checkbox"/> Roof Condition            | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Condition of siding       | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Windows updated           | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Appearance of foundations | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |

**Yard and Landscaping**

- |   |                                       |                                |
|---|---------------------------------------|--------------------------------|
| <input type="checkbox"/> Landscaped       | <input type="checkbox"/> Storage Shed | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Privacy          | <input type="checkbox"/> Pool Area    | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Fenced Yard      | <input type="checkbox"/> _____        | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Patio or Decking | <input type="checkbox"/> _____        | <input type="checkbox"/> _____ |

**Neighborhood appeal**

- |  |                                |                                |
|--|--------------------------------|--------------------------------|
| <input type="checkbox"/> Amount of traffic       | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Condition of homes      | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Availability of parking | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Amenities in the area   | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Noise from neighbors    | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |

**The interior of the home**

- |  |   |                                |
|--|---|--------------------------------|
| <input type="checkbox"/> Kitchen General Condition   | <input type="checkbox"/> Floorplan Layout   | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Bathroom Cleanliness        | <input type="checkbox"/> Bedroom Condition  | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Living Area Condition       | <input type="checkbox"/> Flooring Condition | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Heating and cooling updated | <input type="checkbox"/> _____              | <input type="checkbox"/> _____ |



**Parking/Garage or Carport**

Garage Size

Off Street Parking

\_\_\_\_\_

Garage Condition

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**Other preferences**

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