

REAL ESTATE QUESTIONNAIRE

PLEASE ANSWER TO THE BEST OF YOUR ABILITY
NOTE N/A IF UNKNOWN

PROPERTY SUMMARY

SITE/PROPERTY NAME

STREET ADDRESS

CITY, STATE AND ZIP CODE

CONTACT NAME, PHONE AND EMAIL

TYPE OF PROPERTY

COMMERCIAL: RETAIL OFFICE CHURCH OTHER
RESIDENTIAL: MULTI-FAMILY SINGLE FAMILY

REAL ESTATE ASSESMENT

LOT SQUARE FOOTAGE/ACREAGE

BUILDING SQUARE FOOTAGE

ZONING

WATER [PUBLIC OR PRIVATE]

SEWER [PUBLIC OR PRIVATE]. IF PRIVATE,
PLEASE NOTE PERC RATE

GAS [NATURAL OR PROPANE]

AGE OF EXISTING PROPERTY [IF APPLICABLE]

PHYSICAL CONDITION + APPURTENANCES

ROOF TYPE AND INSTALLATION YEAR

ROOF WARRANTY IN EFFECT?

YES NO IF YES, PROVIDE WARRANTY DOCUMENTATION

WINDOW TYPE AND INSTALLATION YEAR

MECHANICAL UNIT TYPE AND INSTALLATION YEAR

MECHANICAL UNIT TYPE AND INSTALLATION YEAR

ELECTRICAL: NUMBER OF PHASES, VOLTS AND WATTS

PAVING TYPE AND INSTALLATION YEAR

STORAGE TANKS

YES NO TYPE: _____

IF YES, ARE THEY ACTIVE?

ANY KNOWN LEAKING TANK CASES?

YES NO IF YES, PROVIDE ENVIRONMENTAL REPORTS

