

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 ASSESSMENT

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

NAME OF PERSON FILLING OUT QUESTIONNAIRE

PRINT NAME



PO BOX 338 .
THE PLAINS, VIRGINIA 20196
O:855.383.3264 . W: DCMIMA.COM