

PROPERTY INFORMATION

Date you purchased this property: _____

Please list any special features or upgrades you have made to your home: _____

What have you enjoyed most about your home? _____

1st Mortgage Lender: _____

Lender's Address: _____

City: _____ State: _____ Zip: _____

Loan #: _____ Monthly Payment: \$ _____ Balance: \$ _____

Lender's Phone #: _____ Contact: _____

2nd Mortgage Lender: _____

Lender's Address: _____

City: _____ State: _____ Zip: _____

Loan #: _____ Monthly Payment: \$ _____ Balance: \$ _____

Lender's Phone #: _____ Contact: _____

3rd Mortgage Lender: _____

Lender's Address: _____

City: _____ State: _____ Zip: _____

Loan #: _____ Monthly Payment: \$ _____ Balance: \$ _____

Lender's Phone #: _____ Contact: _____

Current Annual Property Tax: \$ _____

School District: _____

Elementary School: _____

Middle School: _____

High School: _____

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Listening Between The Lines

CLIENT LISTING WORKSHEET

This information will assist me in providing the best marketing efforts on your home as well as offering you the best service possible. Please fill out this booklet, including the back page, completely.

PROPERTY ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

TRACT NAME: _____ **MODEL NAME:** _____

Sq. Ft. _____

DATE: _____

*This information will remain confidential and will not be shared with any third party.
By completing this form, you give permission to your real estate agent to contact you by telephone, fax or e-mail.*

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CLIENT INFORMATION (Please fill out one page for each person.)

FIRST NAME: _____ **LAST NAME:** _____

Home Phone #: _____ **Work Phone #:** _____

Home Fax #: _____ Work Fax #: _____

Cell Phone #: _____ **Additional Phone #:** _____

Best Day to Reach You: _____ **Best Time:** _____ **At Which Number?** _____

Best Place to Leave You a Voicemail Message: _____

Employer Name: _____ How Long? _____ yrs

Title: _____ How Long at this Position? _____ yrs

Employer Address: _____ City: _____ State: _____ Zip: _____

Business E-mail Address: _____

Home E-mail Address: _____

Additional contact info: _____

Marital Status: Single Living Together Married Separated Divorced

Birth Date: _____ Anniversary Date (if applicable): _____

CHILDREN'S NAME(S) (if applicable):

FIRST: _____ LAST: _____ Birthday: _____ Age: _____

FIRST: _____ LAST: _____ Birthday: _____ Age: _____

FIRST: _____ LAST: _____ Birthday: _____ Age: _____

FIRST: _____ LAST: _____ Birthday: _____ Age: _____

FIRST: _____ LAST: _____ Birthday: _____ Age: _____

FIRST: _____ LAST: _____ Birthday: _____ Age: _____

HOBBIES/INTERESTS:

(Please list all your hobbies, interests, club memberships, special affiliations, unique needs, medical conditions and *all* pertinent information that will allow me to provide you better service.)

CLIENT INFORMATION (Please fill out one page for each person.)

FIRST NAME: _____ **LAST NAME:** _____

Home Phone #: _____ **Work Phone #:** _____

Home Fax #: _____ Work Fax #: _____

Cell Phone #: _____ **Additional Phone #:** _____

Best Day to Reach You: _____ **Best Time:** _____ **At Which Number?** _____

Best Place to Leave You a Voicemail Message: _____

Employer Name: _____ How Long? _____ yrs

Title: _____ How Long at this Position? _____ yrs

Employer Address: _____ City: _____ State: _____ Zip: _____

Business E-mail Address: _____

Home E-mail Address: _____

Additional contact info: _____

Birth Date: _____

PET'S NAME(S): 1. _____ Dog Cat Bird Other: _____

2. _____ Dog Cat Bird Other: _____

3. _____ Dog Cat Bird Other: _____

► **Please list any special instructions for your pets that a Realtor® should be aware of when showing your home.**

HOBBIES/INTERESTS:

(Please list all your hobbies, interests, club memberships, special affiliations, unique needs, medical conditions and *all* pertinent information that will allow me to provide you better service.)

