

Home Feature Checklist



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Escarpment Golfi
Realty Inc., Brokerage
Independently Owned & Operated

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Owned & Operated

664 Fennell Ave E.
Hamilton, ON
L8V 1V1

905-575-7700

Grimsby Office:
905-945-0188

Toll Free:
1-800-288-9184

Fax:
905-575-1962

Home Address: _____

Type of Home

- Detached Townhouse
 Semi-detached Duplex
 High rise Low rise

Type of ownership

- Condominium Freehold

Age of home

Lot size

- Small Medium Large

Type of exterior finish

- Brick Combination brick and siding
 Wood Metal / Vinyl Siding

Windows — Construction

- Wood Aluminum
 Vinyl Other

Foundation construction

- Concrete block Poured Concrete
 Stone / Rubble

Sewer system

- Municipal Cistern Septic

Water

- Municipal Well

Water Heating

- Gas Electric

Electrical system

- Fuses Circuit breakers

Type of heating fuel

- Gas Oil Electric Wood

Air conditioning

- Central Window

Bedrooms

- 1 2 3 4 5

Bathrooms

- 1 2 3

Master bedroom en suite

- Yes No

Ground floor bathroom

- Yes No

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Eat-in kitchen	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Separate dining room	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Separate family room	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Fireplace	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Spare room for den or home office	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Basement for storage or workshop	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Apartment for rental income	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Deck or patio	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Private driveway	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Garage	<input type="checkbox"/> Carport	<input type="checkbox"/> Attached <input type="checkbox"/> Detached
Fenced Yard	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Furnace (Fuel)	<input type="checkbox"/> Gas	<input type="checkbox"/> Propane <input type="checkbox"/> Oil <input type="checkbox"/> Electric
Furnace (Type)	<input type="checkbox"/> Forced Air	<input type="checkbox"/> Radiant (Hot Water)
Furnace Age		
Roof	<input type="checkbox"/> Asphalt	<input type="checkbox"/> Steel <input type="checkbox"/> Slate
	Other _____	
Close to (approximate km)		
Work	<input type="text"/>	Spouse's work <input type="text"/>
Public transportation	<input type="text"/>	Schools <input type="text"/>
Shopping	<input type="text"/>	Parks/playgrounds <input type="text"/>
Recreation facilities	<input type="text"/>	Restaurants <input type="text"/>
Places of worship	<input type="text"/>	Veterinarian <input type="text"/>
Police station	<input type="text"/>	Fire station <input type="text"/>
Hospital	<input type="text"/>	Doctor/dentist <input type="text"/>