OPEN HOUSE FEEDBACK CARD



NAME:		SOUTHEAS
Емаіц:		——— R E S I D E N T
PHONE:	()Text ()Call	

PLEASE RATE THIS HOME ON EACH OF THE FOLLOWING CRITERIA:

	Poor	FAIR	GOOD	EXCELLENT	SUPERIOR
CURB APPEAL	1	2	3	4	5
FIRST IMPRESSION	1	2	3	4	5
CONDITION	1	2	3	4	5
LOCATION	1	2	3	4	5
FLOOR PLAN	1	2	3	4	5
BACKYARD	1	2	3	4	5

WHAT DO YOU LIKE MOST ABOUT THIS HOME?

WHAT DO YOU LEAST LIKE ABOUT THIS HOME?

ARE YOU CURRENTLY WORKING WITH A REAL ESTATE AGENT? ____ TIME FRAME IN WHICH TO MOVE? _____

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SOUTHEASTER	N

NAME: _		
EMAIL:		

PHONE: ______() TEXT () CALL

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