

## Home Features Checklist

Before you start looking for a home, make a list of all the features you and your family want or need. Every time you visit a home, fill in the following checklist by putting a check mark (✓) beside the chosen feature. Compare each home you visit to the list of features you are looking for, to find out which one best meets your needs.

| Home Features Checklist                        |  |
|--|--|
| Is the home new or resale?                     | <input type="checkbox"/> Resale <input type="checkbox"/> New   |
| What kind of home is it?                       | <input type="checkbox"/> Detached <input type="checkbox"/> Semi-detached<br><input type="checkbox"/> Townhouse <input type="checkbox"/> Duplex<br><input type="checkbox"/> High-rise <input type="checkbox"/> Low-rise<br><input type="checkbox"/> Freehold <input type="checkbox"/> Condominium |
| How old is the home?                           | # years:   |
| How large is the lot?                          | <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large  |
| Is it on a quiet street?                       | <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| What is the exterior finish?                   | <input type="checkbox"/> Brick <input type="checkbox"/> Aluminum siding<br><input type="checkbox"/> Wood <input type="checkbox"/> Vinyl siding<br><input type="checkbox"/> Combination brick and siding  |
| What is the foundation made of?                | <input type="checkbox"/> Concrete block <input type="checkbox"/> Concrete <input type="checkbox"/> Preserved Wood  |
| How many bedrooms are there?                   | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4+   |
| How many bathrooms?                            | <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3+  |
| How is the home heated?                        | <input type="checkbox"/> Gas <input type="checkbox"/> Oil<br><input type="checkbox"/> Electric <input type="checkbox"/> Wood   |
| Does it have air conditioning?                 | <input type="checkbox"/> Central <input type="checkbox"/> Window   |
| Does the master bedroom have its own bathroom? | <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| Is there a bathroom on the ground floor?       | <input type="checkbox"/> Yes <input type="checkbox"/> No   |

|   |                                 |   |
|---|---------------------------------|---|
| Is there an eat-in kitchen?                                       | <input type="checkbox"/> Yes    | <input type="checkbox"/> No                                       |
| A separate dining room?   | <input type="checkbox"/> Yes    | <input type="checkbox"/> No                                       |
| A separate family room?   | <input type="checkbox"/> Yes    | <input type="checkbox"/> No                                       |
| A fireplace or woodstove?   | <input type="checkbox"/> Yes    | <input type="checkbox"/> No                                       |
| A spare room for an office?                                       | <input type="checkbox"/> Yes    | <input type="checkbox"/> No                                       |
| Does the basement have enough space for storage or a workshop?    | <input type="checkbox"/> Yes    | <input type="checkbox"/> No                                       |
| Is there a deck or patio?   | <input type="checkbox"/> Yes    | <input type="checkbox"/> No                                       |
| A private driveway?   | <input type="checkbox"/> Yes    | <input type="checkbox"/> No                                       |
| A garage or carport?  | <input type="checkbox"/> Garage | <input type="checkbox"/> Carport <input type="checkbox"/> Neither |
| Does the home have a security system?                             | <input type="checkbox"/> Yes    | <input type="checkbox"/> No                                       |
| Is the home accessible (for seniors or people with a disability)? | <input type="checkbox"/> Yes    | <input type="checkbox"/> No                                       |
| How close is the home (in kms) to:                                | Your work                       | Your spouse's work  |
|   | Public transportation           | Schools   |
|   | Shopping                        | Parks/playgrounds   |
|   | Recreational facilities         | Restaurants   |
|   | Place of worship                | Veterinarian  |
|   | Police station                  | Fire station  |
|   | Hospital                        | Doctor/dentist  |