Open House Feedback Form.

Name:				
Address:				
Phone:		—— Best ti	me to contact:	AM or PM
How did you h	near about today's	Open House?		
Do you plan to	o purchase a hom	e in		
1-3 Months	3-6 Months	6-9 Months	1+ Years	N/A
Do you plan to	sell your home in	·		
1-3 Months	3-6 Months	6-9 Months	1+ Years	N/A
Are you currer	ntly working with o	REALTOR®?	Yes or No	
Please rate the following from 1-5				
Curb Appeal	1	2	3 4	5
Kitchen ——	1	2	3 4	5
Bedrooms —	1	2	3 4	5
Bathrooms –	1	2	3 4	5
Backyard —	1	2	3 4	5
Family Room	1	2	3 4	5
Comments:				

