

# CONDO BUYER'S CHECKLIST

When buying a condo there are many details to review and make sure your needs are covered. Use this checklist to ensure you don't miss any of those important details before signing on the bottom line. Need help locating the best condo for you? Call Christine at 403-400-5541 or [christine@innercityyyc.com](mailto:christine@innercityyyc.com)

<b>CONDO DESCRIPTION</b>	Rate this Condo 1 2 3 4 5 6 7 8 9 10
Name of Building _____ Address _____	
Condo Fees \$ _____/mth Bedrooms _____ Bathrooms _____ En suite Y/N Size of Unit _____	

<b>FEATURES</b>			
Laundry IN SUITE or SHARED	Fireplace Y/N	Balcony Y/N	BBQ Allowed Y/N GAS/PROPANE
Access to Bus or CTrain Y/N		Distance to Public Transportation _____	Air Conditioning Y/N

<b>ITEMS INCLUDED</b> <input type="checkbox"/> Fridge <input type="checkbox"/> Stove gas-electric-induction <input type="checkbox"/> Dishwasher Metal or Plastic <input type="checkbox"/> Microwave Oven <input type="checkbox"/> Hood Fan <input type="checkbox"/> Garburator <input type="checkbox"/> Washer Front or Top Load <input type="checkbox"/> Dryer <input type="checkbox"/> Window Coverings	<b>AMENITIES INCLUDED</b> <input type="checkbox"/> Security Full time - Part time <input type="checkbox"/> Pool/hot tub/steam room <input type="checkbox"/> Gym <input type="checkbox"/> Guest Suite <input type="checkbox"/> Visitor parking <input type="checkbox"/> Social room <input type="checkbox"/> Handicap access <input type="checkbox"/> Other _____	<b>RESTRICTIONS</b> <input type="checkbox"/> Age - minimum age? _____ Visitors allowed? Y/N If Y Max. stay _____ Age _____ <input type="checkbox"/> Pets allowed? Y/N Size/weight _____ Common area restrictions _____ _____
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<b>UTILITIES INCLUDED IN CONDO FEES</b>	
<input type="checkbox"/> Heat Y/N	If no \$ _____/mth
<input type="checkbox"/> Electricity Y/N	If no \$ _____/mth
<input type="checkbox"/> Water/Sewer Y/N	If no \$ _____/mth

<b>PROPERTY TAXES</b>	
<input type="checkbox"/> Dwelling	\$ _____/mth
<input type="checkbox"/> Parking (if titled)	\$ _____/mth
<input type="checkbox"/> Home Owners Assoc. fees Y/N if Y \$ _____	

<b>PARKING</b>	
<input type="checkbox"/> Underground or Surface #of Stalls _____	
<input type="checkbox"/> Parking Type: _____ Title _____ Assigned	
<input type="checkbox"/> Location _____	

<b>STORAGE</b>	
Locker Storage Y/N	In Unit or In Parkade
Storage Unit Number _____	Size _____
Bike Storage Y/N	

<b>MONTHLY EXPENSES</b>	
Mortgage Principal & Interest \$	_____
Condo Fees	_____
Utilities	_____
Taxes	_____
Total	\$ _____

<b>VIEW</b>	
<input type="checkbox"/> Mountain	_____
<input type="checkbox"/> City	_____
<input type="checkbox"/> Obstructions	_____
<input type="checkbox"/> Other	_____

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