

Property Details (Check all that apply)



Note to the Property Owner: This form may be provided to a purchaser for insurance purposes.
Please do not provide any information that you are unsure of (leave blank or check off "not sure").

Address: _____

Information provided by: _____ on Date: _____

A. Electrical & Water Systems:

Size of Electrical Service: _____ AMP

Wiring: Copper Aluminum Knob & Tube Not sure Age: _____

Plumbing: Copper Cast Iron Plastic/PVC Galvanized Not sure Age: _____

C. HVAC:

Heating Type: Gas Furnace Electric Furnace Baseboard Boiler Geothermal
 Wood Stove Other: _____ | HRV System: Yes No
 Age: _____ Efficiency: High Mid Low Not sure n/a

Air Conditioning: Central Window Portable Split Unit Age: _____

Hot Water Tank: Gas Electric Size: _____ Gallons Age: _____
 Owned Rented at \$ _____ per month from: _____

D. Other:

Shingles: Asphalt Fibreglass Cedar Metal Not Sure Age: _____

Windows: Wood Aluminum/Steel Fibreglass Vinyl Not Sure Age: _____

Fireplace: Wood Gas Electric | Working: Yes No | Freestanding: Yes No

Garage: Attached Detached | Single Double Triple Other: _____

E. Technology:

Item	Number		
Audio/Video Doorbell			<input type="checkbox"/> Inclusion <input type="checkbox"/> Exclusion
Interior Security Camera		<input type="checkbox"/> Affixed <input type="checkbox"/> Not Affixed	<input type="checkbox"/> Inclusion <input type="checkbox"/> Exclusion
Interior Motion Detector		<input type="checkbox"/> Affixed <input type="checkbox"/> Not Affixed	<input type="checkbox"/> Inclusion <input type="checkbox"/> Exclusion
Exterior Security Camera		<input type="checkbox"/> Affixed <input type="checkbox"/> Not Affixed	<input type="checkbox"/> Inclusion <input type="checkbox"/> Exclusion
Exterior Motion Detector/Light		<input type="checkbox"/> Affixed <input type="checkbox"/> Not Affixed	<input type="checkbox"/> Inclusion <input type="checkbox"/> Exclusion
Window Alarm		<input type="checkbox"/> Affixed <input type="checkbox"/> Not Affixed	<input type="checkbox"/> Inclusion <input type="checkbox"/> Exclusion
TV / Monitor Projection System		<input type="checkbox"/> Affixed <input type="checkbox"/> Not Affixed	<input type="checkbox"/> Inclusion <input type="checkbox"/> Exclusion
Surround Stereo System		<input type="checkbox"/> Affixed <input type="checkbox"/> Not Affixed	<input type="checkbox"/> Inclusion <input type="checkbox"/> Exclusion
Nest / Smart Thermostat			<input type="checkbox"/> Inclusion <input type="checkbox"/> Exclusion
Electric Car Charger		Type:	<input type="checkbox"/> Inclusion <input type="checkbox"/> Exclusion
Other:		<input type="checkbox"/> Affixed <input type="checkbox"/> Not Affixed	<input type="checkbox"/> Inclusion <input type="checkbox"/> Exclusion

Buyers should directly verify any and all property information provided herein, as the Vendor makes no warranty, representation or guarantee as to its content, accuracy or completeness.

Property Details (Check all that apply)

Whole-Home Security System: Yes No | Wired Wireless | Monitored Unmonitored
 Contract Rental | Term/Expiry Date: _____ Provider: _____

Notes: _____

F. Foundation / Basement:

Style: Full Partial Crawlspace Slab Mixed / Split-Level
 Type: Standard Height Low Height Raised Walk-Out
 Construction: Concrete Stone Preserved Wood Cinderblock Not Sure/Unknown
 Finishing: Finished: _____ % (approx.). Unfinished Insulated n/a
 Sump Pump: Yes No Backwater Valve: Yes No Not Sure/Unknown

G. Fixtures: *

Is there anything affixed, or **appears to be affixed**, to the property that the Owner(s) would like removed prior to possession? (Examples include: TV wall mounts, shelving systems, window coverings (part or whole), mirrors, light fixtures, smart technology, movable kitchen islands and bars, outdoor fire pits, etc.)

Item	Location / Description	Will Be Removed	Will Remain
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

* **Important Note:** *Patching, painting and/or repair of any damage created by the removal of any items from the property is required prior to possession.*

H. General Improvements or Upgrades:

1. _____ Year completed: _____
2. _____ Year completed: _____
3. _____ Year completed: _____
4. _____ Year completed: _____
5. _____ Year completed: _____
6. _____ Year completed: _____
7. _____ Year completed: _____
8. _____ Year completed: _____