

# Client's Needs Analysis

Quality, blended with excellent service is the foundation for a successful business relationship



**TO BE FAX BACK TO : 65-63920096**

## CLIENT'S INFORMATION

Name : \_\_\_\_\_ Email : \_\_\_\_\_  
Mobile phone : \_\_\_\_\_ Work Telephone : \_\_\_\_\_

## FAMILY PROFILE

No of Children coming with you...

Location of School :

Will you be bring any pets?

Yes ☐ No ☐

## HOMESEARCH INFORMATION - RENTING

Arrival Date:		Homeseach Date:		Have you been to Singapore?	
Length of Lease Term:		Who signs lease agreement:			
		Your Housing Budget:			
Who pays security deposit:		Desired move-in date:			
Preferred Housing:	Apartment <input type="checkbox"/>	Town House <input type="checkbox"/>	Condo <input type="checkbox"/>	Single Family Home <input type="checkbox"/>	
Housing area preferred:	Urban <input type="checkbox"/>	Suburbs <input type="checkbox"/>	Rural <input type="checkbox"/>		
Acceptable commute time:		Commuting by:	Car <input type="checkbox"/>	Rail <input type="checkbox"/>	Bus <input type="checkbox"/> Other <input type="checkbox"/>
Destination Residence: Part Furnished <input type="checkbox"/> Unfurnished <input type="checkbox"/>			Number of bedrooms:		
Appliances required: Dishwasher <input type="checkbox"/> Washer <input type="checkbox"/> Dryer <input type="checkbox"/> Fridge <input type="checkbox"/>					
Is it more important to reside closer to work or schools: <input type="checkbox"/> Work <input type="checkbox"/> Schools (To specify 1 to 4 in order of preference) <input type="checkbox"/> Pubs <input type="checkbox"/> Shopping Centres					
Other requirements:					

## FURNITURE

Are you bringing your own furniture: Yes <input type="checkbox"/> No <input type="checkbox"/>	Lease furniture budget: /month
When do you expect your furniture to arrive:	

**Other Remarks:**