

WORKSHEET THREE: HOUSING CONSIDERATIONS

Part A: The following is a list of factors to consider in choosing the location and features of a home that is right for you. You can also use this worksheet to evaluate possible homes based on what is important to you.

	Important			Comments
	Yes	No	Unsure	
Location				
In the city or suburbs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
In the country	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Close to family members	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Close to friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Close to job or day activity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Close to public transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Close to businesses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Close to favorite recreation activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Close to place of worship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Close to other things:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
[please list] _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
[please list] _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Safety in the neighborhood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Physical accessibility of the neighborhood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Atmosphere/personality of the neighborhood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Part B: Check the housing features that are important to you.

	Important		Present		Comments
	Y	N	Y	N	
Type of Home					
Apartment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Single detached housing unit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Condominium	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Multiple unit housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Doesn't matter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Rooms

Private bedroom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Enough bathrooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Dining room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Den or family room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Basement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

	Important		Present		Comments
	Y	N	Y	N	
Accessibility (see Worksheet 4)					

Outdoors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Indoors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Extras

Air conditioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fireplace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Garage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Porch/balcony/deck	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Washer/dryer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Microwave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Yard/garden	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Safety

Deadbolt locks

Emergency alarm system

Neighborhood watch

Attractiveness

Indoors

Outdoors