

CERTIFIED NEW HOME SPECIALIST™ PROSPECT FOLLOW-UP SUMMARY

| | | |
|--|-------|--------|
| | Name: | Phone: |
| | | Phone: |
| | | Email: |

| STATUS | DATE | STATUS | NOTES |
|-------------------------------------|-----------------|--------------------------|-------|
| <input type="checkbox"/> Positive | | <input type="checkbox"/> | |
| <input type="checkbox"/> Negative | | <input type="checkbox"/> | |
| <input type="checkbox"/> Needs | | <input type="checkbox"/> | |
| <input type="checkbox"/> Follow-up | | <input type="checkbox"/> | |
| NEEDS & MOTIVATIONS | | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | |
| TIMING & COMMITMENT | | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | |
| LOCATION & HOME SITE | | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | |
| DESIGN & QUALITY | | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | |
| BUILDER & SALES REPS | | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | |
| COSTS & FINANCING | | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | |
| TRUST NEED BENEFIT URGENCY | Very Important! | | |
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