



Finding the Right


Home

Moving checklist



MOVING

Checklist

Moving Date : _____

PREPARATION

- ☐ Start packing non-essential items
- ☐ Label each box with its contents
- ☐ Pack fragile items with care
- ☐ Keep important documents
- ☐ Create an inventory list of packed boxes

ARRANGE FOR MOVING

- ☐ Confirm the details with agency
- ☐ Arrange for parking permits
- ☐ Prepare a plan for pets or children
- ☐ Take measurements of doorways and staircases in your new home to ensure large furniture will fit

FINAL PREPARATIONS

- ☐ Defrost and clean your refrigerator and freezer
- ☐ Dispose of any hazardous materials or flammable items safely
- ☐ Pack an essential box with items you'll need immediately upon arrival
- ☐ Take photos or videos of your belongings for insurance purposes

MOVING DAY

- ☐ Conduct a final walkthrough of your old home before leaving
- ☐ Keep important documents and valuable items with you
- ☐ Check that all utilities are turned off, windows are closed, and doors are locked
- ☐ Carry out a thorough check of your new home upon arrival





FINDING THE RIGHT *Home*

Write down everything that is important to you and your family before you start looking for your dream home.

LOCATION

(downtown, suburbs, proximity to school, work, shopping, etc.)

SIZE

(square footage, lot size, number of bedrooms, baths, garage, etc.)

FEATURES

(pool, energy efficiency, accessibility, etc.)

LIFESTYLE

(consider whether you are working or at home, what services you need nearby)

TYPE OF HOME

(detached, semi-detached, duplex, townhome, condo, etc.)





Home FEATURES COMPARISON

Use this comparison checklist whenever you view a home to see all options side by side.
Features Checklist:

| | HOME #1 | HOME #2 | HOME #3 |
|---------------------------|---|---|---|
| NEW OR RESALE | New Resale | New Resale | New Resale |
| HOME TYPE | Detached, Semi-Detached, Townhouse, Duplex/Triplex, High/Low Rise | Detached, Semi-Detached, Townhouse, Duplex/Triplex, High/Low Rise | Detached, Semi-Detached, Townhouse, Duplex/Triplex, High/Low Rise |
| OWNERSHIP TYPE | Freehold Leasehold Condo Co-op | Freehold Leasehold Condo Co-op | Freehold Leasehold Condo Co-op |
| AGE OF HOME | | | |
| LOT SIZE | Small Medium Large | Small Medium Large | Small Medium Large |
| EXTERIOR FINISH | Brick, Aluminum, Wood, Vinyl Siding, Combo Brick/Siding, Stucco | Brick, Aluminum, Wood, Vinyl Siding, Combo Brick/Siding, Stucco | Brick, Aluminum, Wood, Vinyl Siding, Combo Brick/Siding, Stucco |
| EXTERIOR CONDITION | Fair Good Excellent | Fair Good Excellent | Fair Good Excellent |
| LOT SIZE | Small Medium Large | Small Medium Large | Small Medium Large |





FEATURES CHECKLIST

HOME #1

HOME #2

HOME #3

| | | | |
|-----------------------------|--|--|--|
| EXTERIOR FINISH | Brick Aluminum Siding Wood Vinyl Siding Combo Brick/Siding Stucco | Brick Aluminum Siding Wood Vinyl Siding Combo Brick/Siding Stucco | Brick Aluminum Siding Wood Vinyl Siding Combo Brick/Siding Stucco |
| EXTERIOR CONDITION | Fair Good Excellent | Fair Good Excellent | Fair Good Excellent |
| LOT SIZE | Small Medium Large | Small Medium Large | Small Medium Large |
| ROOF | Fair Good Excellent | Fair Good Excellent | Fair Good Excellent |
| WINDOWS | Wood Vinyl Aluminum Other | Wood Vinyl Aluminum Other | Wood Vinyl Aluminum Other |
| WINDOW CONDITION | Fair Good Excellent | Fair Good Excellent | Fair Good Excellent |
| FOUNDATION | Concrete Concrete Block Preserved Wood | Concrete Concrete Block Preserved Wood | Concrete Concrete Block Preserved Wood |
| FOUNDATION CONDITION | Fair Good Excellent | Fair Good Excellent | Fair Good Excellent |
| BEDROOMS | 1 2 3 4 5+ | 1 2 3 4 5+ | 1 2 3 4 5+ |





FEATURES CHECKLIST

HOME #1

HOME #2

HOME #3

| | | | |
|-------------------------------------|---|---|---|
| BATHROOMS | 1 2 3+ | 1 2 3+ | 1 2 3+ |
| HEATING SYSTEM | Gas Oil Electric Wood | Gas Oil Electric Wood | Gas Oil Electric Wood |
| AGE OF SYSTEM | | | |
| AIR CONDITIONING | Yes (Central Air) Yes (Window) No | Yes (Central Air) Yes (Window) No | Yes (Central Air) Yes (Window) No |
| AGE OF A/C SYSTEM | | | |
| BATHROOM IN MASTER | Yes No | Yes No | Yes No |
| BATHROOM ON GROUND FLOOR | Yes No | Yes No | Yes No |
| EAT-IN KITCHEN | Yes No | Yes No | Yes No |
| SEPARATE DINING ROOM | Yes No | Yes No | Yes No |





FEATURES CHECKLIST

HOME #1

HOME #2

HOME #3

| | | | |
|---|------------------------------|------------------------------|------------------------------|
| FAMILY ROOM | Yes No | Yes No | Yes No |
| BASEMENT | Finished Unfinished | Finished Unfinished | Finished Unfinished |
| FIREPLACE OR WOOD STOVE | Yes No | Yes No | Yes No |
| OFFICE OR HOBBY ROOM | Yes No | Yes No | Yes No |
| PRIVATE DRIVEWAY | Yes No | Yes No | Yes No |
| GARAGE OR CARPORT | Garage Carport Neither | Garage Carport Neither | Garage Carport Neither |
| GARAGE OR CARPORT ATTACHED | Yes No | Yes No | Yes No |
| SECURITY SYSTEM | Yes No | Yes No | Yes No |
| ACCESSIBILTY FEATURES | Yes No | Yes No | Yes No |





FEATURES CHECKLIST

HOME #1

HOME #2

HOME #3

| | | | |
|---|--|--|--|
| NEIGHBORHOOD | Fair Good Excellent | Fair Good Excellent | Fair Good Excellent |
| QUIET STREET | Yes No | Yes No | Yes No |
| PROXIMITY TO KEY PLACES AND SERVICES | Work School Public Trans. Shopping | Work School Public Trans. Shopping | Work School Public Trans. Shopping |
| PROXIMITY TO KEY PLACES AND SERVICES | Parks/Rec. Restaurants Church | Parks/Rec. Restaurants Church | Parks/Rec. Restaurants Church |
| PROXIMITY TO KEY PLACES AND SERVICES | Police/Fire Doctor/Dentist Hospital | Police/Fire Doctor/Dentist Hospital | Police/Fire Doctor/Dentist Hospital |
| ITEMS INCLUDED IN THE SALE | Washer/Dryer Fridge Stove Window Treatments | Washer/Dryer Fridge Stove Window Treatments | Washer/Dryer Fridge Stove Window Treatments |
| REPAIRS IN THE SHORT/LONG TERM | Immediate: Cost Estimate: | Immediate: Cost Estimate: | Immediate: Cost Estimate: |
| REPAIRS IN THE SHORT/LONG TERM | In 1-5 Years: Cost Estimate: | In 1-5 Years: Cost Estimate: | In 1-5 Years: Cost Estimate: |
| REPAIRS IN THE SHORT/LONG TERM | In 5-10 Years: Cost Estimate: | In 5-10 Years: Cost Estimate: | In 5-10 Years: Cost Estimate: |



Packing CHECKLIST



| No | Item | Room in New Home | ✓ |
|----|------|------------------|---|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |
| 8 | | | |
| 9 | | | |
| 10 | | | |
| 11 | | | |
| 12 | | | |
| 13 | | | |
| 14 | | | |
| 15 | | | |
| 16 | | | |
| 17 | | | |
| 18 | | | |
| 19 | | | |
| 20 | | | |

Packing CHECKLIST



| No | Item | Room in New Home | ✓ |
|----|------|------------------|---|
| 1 | | | |
| 2 | | | |
| 3 | | | |
| 4 | | | |
| 5 | | | |
| 6 | | | |
| 7 | | | |
| 8 | | | |
| 9 | | | |
| 10 | | | |
| 11 | | | |
| 12 | | | |
| 13 | | | |
| 14 | | | |
| 15 | | | |
| 16 | | | |
| 17 | | | |
| 18 | | | |
| 19 | | | |
| 20 | | | |



Moving Day Survival Kit

Documents

- ☐ Passport
- ☐ Boarding pass
- ☐ Driver's license
- ☐ Health insurance
- ☐ Copies of documents
- ☐ Cards + Cash
- ☐
- ☐
- ☐
- ☐

Toiletries

- ☐ Toothbrush + paste
- ☐ Deodorant
- ☐ Shampoo + conditioner
- ☐ Shaving supplies
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐

Electronics

- ☐ Phone + Charger
- ☐ Camera + Charger
- ☐ Laptop + Charger
- ☐ Travel adapter
- ☐ Headphones
- ☐
- ☐
- ☐
- ☐
- ☐

Health and beauty

- ☐ Hand sanitizer
- ☐ Sunscreen
- ☐ Makeup + remover
- ☐ Medications
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐

Clothes

- ☐
- ☐
- ☐
- ☐
- ☐
- ☐
- ☐

Others

- ☐ Sleeping mask
- ☐ Sunglasses
- ☐
- ☐
- ☐
- ☐
- ☐

UTILITIES LIST

(TO CANCEL, TRANSFER, & SET UP)

Current Home

Service

Provider

Account No.

Phone No.

Cost

Cancelled? ☐

New Home

Service

Provider

Account No.

Phone No.

Cost

Transferred? ☐

Set Up? ☐

Current Home

Service

Provider

Account No.

Phone No.

Cost

Cancelled? ☐

New Home

Service

Provider

Account No.

Phone No.

Cost

Transferred? ☐

Set Up? ☐

Current Home

Service

Provider

Account No.

Phone No.

Cost

Cancelled? ☐

New Home

Service

Provider

Account No.

Phone No.

Cost

Transferred? ☐

Set Up? ☐

Current Home

Service

Provider

Account No.

Phone No.

Cost

Cancelled? ☐

New Home

Service

Provider

Account No.

Phone No.

Cost

Transferred? ☐

Set Up? ☐

UTILITIES LIST

(TO CANCEL, TRANSFER, & SET UP)

Current Home

Service

Provider

Account No.

Phone No.

Cost

Cancelled? ☐

New Home

Service

Provider

Account No.

Phone No.

Cost

Transferred? ☐ Set Up? ☐

Current Home

Service

Provider

Account No.

Phone No.

Cost

Cancelled? ☐

New Home

Service

Provider

Account No.

Phone No.

Cost

Transferred? ☐ Set Up? ☐

Current Home

Service

Provider

Account No.

Phone No.

Cost

Cancelled? ☐

New Home

Service

Provider

Account No.

Phone No.

Cost

Transferred? ☐ Set Up? ☐

Current Home

Service

Provider

Account No.

Phone No.

Cost

Cancelled? ☐

New Home

Service

Provider

Account No.

Phone No.

Cost

Transferred? ☐ Set Up? ☐

CHANGE OF ADDRESS

CHECKLIST

UTILITIES / SERVICES

- ☐ MOBILE (& LANDLINE) TELEPHONES
- ☐ INTERNET
- ☐ CABLE / STREAMING
- ☐ ELECTRIC, WATER, & GAS
- ☐ HOME SECURITY COMPANY
- ☐ HOUSEKEEPING
- ☐ LAWN & POOL MAINTENANCE

PROFESSIONAL SERVICES

- ☐ DOCTORS
- ☐ PHARMACIST
- ☐ DENTIST
- ☐ VETERINARIANS
- ☐ ACCOUNTANT
- ☐ ATTORNEY

MISCELLANEOUS

- ☐ SHOPPING MEMBERSHIPS
- ☐ CAR INSURANCE
- ☐ HOME / RENTER'S INSURANCE

AGENCIES

- ☐ POST OFFICE
- ☐ SOCIAL SECURITY ADMINISTRATION
- ☐ DIVISION OF MOTOR VEHICLES
- ☐ PET LICENSING
- ☐ TAX AGENCY
- ☐ HEALTH CARE ADMINISTRATION

ORGANIZATIONS

- ☐ SCHOOLS
- ☐ EMPLOYER
- ☐ RELIGIOUS ORGANIZATIONS
- ☐ RECREATIONAL ORGANIZATIONS (GYM)

FINANCIAL

- ☐ BANKS & CREDIT UNIONS
- ☐ PENSION
- ☐ CREDIT REPORTING AGENCIES
- ☐ STUDENT LOANS

TRANSPORTATION

- ☐ ROADSIDE ASSISTANCE
- ☐ FREQUENT FLYER PROGRAMS

MONTHLY BUDGET TRACKER

Income

Starting Balance

Income Stream 1

Income Stream 2

Income Stream 3

Total Income

Food

Groceries

Snacks and Candy

Delivery and Takeout

Restaurants

Total Expenses

Bills

Rent

Electricity

Water and Sewage

Garbage Collection

Internet

Phone

Category 7

Category 8

Category 9

Category 10

Category 11

Category 12

Total Expenses

Expenses

Household Items

Household Repairs

Apparel

Cosmetics

Fun

Travel

Category 7

Category 8

Category 9

Category 10

Category 11

Category 12

Total Expenses

Debt

Mortgage

Loan 1

Credit Card 1

Credit Card 2

Total Debt

Savings

Sinking Fund 1

Sinking Fund 2

Sinking Fund 3

Savings

Total Savings

Total

Total Income

Total Expenses

Total Debt

Total Savings

Ending Balance

NOTES

Date:



ENJOY YOUR NEW *home*

Please reach out if there is
anything you need!



Kristen Goyette

Loan Officer | NMLS 2317637

Cell: 252-560-8632

kgoyette@smprate.com

2600 W Vernon Ave,

Suite L1 and L2

Kinston, NC 28504



Success Mortgage Partners, Inc. doing business as, Success Mortgage Partners, Inc. supports Equal Housing Opportunity. NMLS ID# 130562. This is informational only and is not an offer of credit or commitment to lend. Interest rates, products, and loan terms are subject to change without notice and may not be available at the time of loan application or loan lock-in. Contact Success Mortgage Partners, Inc. to learn more about your eligibility for its mortgage products, including its adjustable-rate mortgage program and options available to you. Loans are subject to buyer and property qualification. Cash reserves may be required. Success Mortgage Partners, Inc. not acting on behalf of or at the direction of HUD/FHA or the Federal Government. © 2025 Success Mortgage Partners, Inc., doing business as Success Mortgage Partners, Inc. supports Equal Housing Opportunity. Mortgage Lender and Mortgage Broker MC130562, NMLS ID# 130562. This is informational only and is not an offer of credit or commitment to lend. Interest rates, products, and loan terms are subject to change without notice and may not be available at the time of loan application or loan lock-in. Contact Success Mortgage Partners, Inc. to learn more about your eligibility for its mortgage products. Loans are subject to buyer, builder, and property qualification. Cash reserves may be required. Success Mortgage Partners, Inc. is not acting on behalf of or at the direction of HUD/FHA or the Federal Government. (www.nmlsconsumeraccess.org). Arizona Licensee #. 590 Pearl Street, Suite 331, Eugene, OR 97401