

Enquiry/Tour form

Enquiry type

Phone Website Email

Date:

 / /

AM PM

How did you hear about us?

- TV Google
 Aged Care Online Stocklands
 Magazine Newspapaer
 Word of mouth Bus advertisement
 Care referral Great Lakes Advocate Online
 Other

Enquiry from:

Family Member Friend Carer Other

Full name:

Address:

Suburb:

State/Territory:

Postcode:

Telephone:

Mobile:

Email:

Is this a purchase or respite enquiry?

Purchase Respite

Enquiry for:

Self Parent(s) Other

Full name(s):

D.O.B. (1):

Age:

D.O.B. (2):

Age:

Address:

Suburb:

State/Territory:

Postcode:

Telephone:

Mobile:

Email:

@

Background

1. DVA: Yes No
Level: Gold White Other

2. ACAT Assessment: Yes No
 Low High

3. Home Care Package: Level 1 Level 2
 Level 3 Level 4

4. Current Care Provider/s:

5. Health Notes:

6. Currently in Care: Yes No

7. Source of Income:

Pension Part Pension Self Funded

8. Home Owner: Yes No
Approximate Value (\$)

9. Has a Pet? Yes No
What kind?

10. Family Contact Details:

Name:
Phone:
Email:

Name:
Phone:
Email:

Please use Comments section for additional contacts.

Inspected Units:

Entered into Hubspot date:

 / /

Has shown interest in Unit Number

Enquiry Level Shown:

Low Medium High Urgent

No Further Interest

Property Consultant:

Comments:

SAMPLE