

www.BuilderVirtualTours.com Powered by Builder Consulting.

Virtual Tour Order **RESALE** Form

(Please fill out a separate form for each tour.)

Date: _____

Tours Requested By: _____ Title: _____

Phone: _____ Fax: _____ Cell: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Website: _____

Company Name: _____ Website: _____

Information of House Being Photographed:

(Please include as much information as possible for website.)

Title for Virtual Tour: _____ (Maximum 40 Characters.)

Address: _____

City: _____ State: _____ Zip: _____

Plan Name: _____ MLS #: _____ Price: _____ Square Ft: _____

Year Built: _____ Garage(s): _____ Bedrooms/Bath: _____ / _____ Patio / Deck / Fence

Subdivision/Community: _____ Website: _____

Builder Name: _____ Website: _____

School District Name: _____ Website: _____

Additional Comments: _____

(This will be posted on Virtual Tour.)

Driving Directions: _____

(This must be provided for photographer.)

Directions Placed Virtual Tour? YES / NO

Closest Major Intersection: _____

Publish/Link Tours to: _____

(For Builder Consulting hosted sites.)

Extra Photo Instructions: _____

(This will not be placed on tour.)

