

UNIFORM RESIDENTIAL APPRAISAL REPORT

Property Description

File No. _____

Property Address _____	City _____	State _____	Zip Code _____
Legal Description _____		County _____	
Assessor's Parcel No. _____	Tax Year _____	R.E. Taxes \$ _____	Special Assessments \$ _____
Borrower _____	Current Owner _____	Occupant: <input type="checkbox"/> Owner <input type="checkbox"/> Tenant <input type="checkbox"/> Vacant	
Property rights appraised <input type="checkbox"/> Fee Simple <input type="checkbox"/> Leasehold	Project Type <input type="checkbox"/> PUD <input type="checkbox"/> Condominium (HUD/VA only)	HOA\$ _____	/Mo. _____
Neighborhood or Project Name _____		Map Reference _____	Census Tract _____
Sale Price \$ _____	Date of Sale _____	Description and \$ amount of loan charges/concessions to be paid by seller _____	
Lender/Client _____		Address _____	
Appraiser _____		Address _____	

Location	<input type="checkbox"/> Urban	<input type="checkbox"/> Suburban	<input type="checkbox"/> Rural	Predominant occupancy	Single family housing PRICE \$ (000) _____ AGE (yrs) _____ Low _____ High _____ Predominant _____	Present land use %	Land use change
Built up	<input type="checkbox"/> Over 75%	<input type="checkbox"/> 25-75%	<input type="checkbox"/> Under 25%				
Growth rate	<input type="checkbox"/> Rapid	<input type="checkbox"/> Stable	<input type="checkbox"/> Slow	<input type="checkbox"/> Tenant	2-4 family _____	<input type="checkbox"/> In process	
Property values	<input type="checkbox"/> Increasing	<input type="checkbox"/> Stable	<input type="checkbox"/> Declining	<input type="checkbox"/> Vacant (0-5%)	Multi-family _____	To: _____	
Demand/supply	<input type="checkbox"/> Shortage	<input type="checkbox"/> In balance	<input type="checkbox"/> Over supply	<input type="checkbox"/> Vacant (over 5%)	Commercial _____		
Marketing time	<input type="checkbox"/> Under 3 mos.	<input type="checkbox"/> 3-6 mos.	<input type="checkbox"/> Over 6 mos.				

Note: Race and the racial composition of the neighborhood are not appraisal factors.
 Neighborhood boundaries and characteristics: _____

Factors that affect the marketability of the properties in the neighborhood (proximity to employment and amenities, employment stability, appeal to market, etc.):

Market conditions in the subject neighborhood (including support for the above conclusions related to the trend of property values, demand/supply, and marketing time -- such as data on competitive properties for sale in the neighborhood, description of the prevalence of sales and financing concessions, etc.):

Project Information for PUDs (If applicable) -- Is the developer/builder in control of the Home Owners' Association (HOA)? YES NO
 Approximate total number of units in the subject project _____ . Approximate total number of units for sale in the subject project _____
 Describe common elements and recreational facilities: _____

Dimensions _____ Site area _____ Corner Lot <input type="checkbox"/> Yes <input type="checkbox"/> No Specific zoning classification and description _____ Zoning compliance <input type="checkbox"/> Legal <input type="checkbox"/> Legal nonconforming (Grandfathered use) <input type="checkbox"/> Illegal <input type="checkbox"/> No zoning Highest & best use as improved: <input type="checkbox"/> Present use <input type="checkbox"/> Other use (explain) _____	Topography _____ Size _____ Shape _____ Drainage _____ View _____ Landscaping _____ Driveway Surface _____ Apparent easements _____ FEMA Special Flood Hazard Area <input type="checkbox"/> Yes <input type="checkbox"/> No FEMA Zone _____ Map Date _____ FEMA Map No. _____																																										
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Utilities</th> <th>Public</th> <th>Other</th> <th>Off-site Improvements</th> <th>Type</th> <th>Public</th> <th>Private</th> </tr> <tr> <td>Electricity</td> <td><input type="checkbox"/></td> <td>_____</td> <td>Street</td> <td>_____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Gas</td> <td><input type="checkbox"/></td> <td>_____</td> <td>Curb/gutter</td> <td>_____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Water</td> <td><input type="checkbox"/></td> <td>_____</td> <td>Sidewalk</td> <td>_____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Sanitary sewer</td> <td><input type="checkbox"/></td> <td>_____</td> <td>Street lights</td> <td>_____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Storm sewer</td> <td><input type="checkbox"/></td> <td>_____</td> <td>Alley</td> <td>_____</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	Utilities	Public	Other	Off-site Improvements	Type	Public	Private	Electricity	<input type="checkbox"/>	_____	Street	_____	<input type="checkbox"/>	<input type="checkbox"/>	Gas	<input type="checkbox"/>	_____	Curb/gutter	_____	<input type="checkbox"/>	<input type="checkbox"/>	Water	<input type="checkbox"/>	_____	Sidewalk	_____	<input type="checkbox"/>	<input type="checkbox"/>	Sanitary sewer	<input type="checkbox"/>	_____	Street lights	_____	<input type="checkbox"/>	<input type="checkbox"/>	Storm sewer	<input type="checkbox"/>	_____	Alley	_____	<input type="checkbox"/>	<input type="checkbox"/>	
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Comments (apparent adverse easements, encroachments, special assessments, slide areas, illegal or legal nonconforming zoning, use, etc.): _____

GENERAL DESCRIPTION		EXTERIOR DESCRIPTION				FOUNDATION			BASEMENT			INSULATION	
No. of Units	_____	Foundation	_____	Slab	_____	Area Sq.Ft.	_____	Roof	_____	<input type="checkbox"/>			
No. of Stories	_____	Exterior Walls	_____	Crawl Space	_____	% Finished	_____	Ceiling	_____	<input type="checkbox"/>			
Type (Det./Att.)	_____	Roof Surface	_____	Basement	_____	Ceiling	_____	Walls	_____	<input type="checkbox"/>			
Design (Style)	_____	Gutters & Dwnspts.	_____	Sump Pump	_____	Walls	_____	Floor	_____	<input type="checkbox"/>			
Existing/Proposed	_____	Window Type	_____	Dampness	_____	Floor	_____	None	_____	<input type="checkbox"/>			
Age (Yrs.)	_____	Storm/Screens	_____	Settlement	_____	Outside Entry	_____	Unknown	_____	<input type="checkbox"/>			
Effective Age (Yrs.)	_____	Manufactured House	_____	Infestation	_____								

ROOMS	Foyer	Living	Dining	Kitchen	Den	Family Rm.	Rec. Rm.	Bedrooms	# Baths	Laundry	Other	Area Sq.Ft.
Basement												
Level 1												
Level 2												

Finished area above grade contains:		Rooms;	Bedroom(s);	Bath(s);	Square Feet of Gross Living Area	
INTERIOR	Materials/Condition	HEATING	KITCHEN EQUIP.	ATTIC	AMENITIES	CAR STORAGE:
Floors	_____	Type _____	Refrigerator <input type="checkbox"/>	None <input type="checkbox"/>	Fireplace(s) # _____ <input type="checkbox"/>	None <input type="checkbox"/>
Walls	_____	Fuel _____	Range/Oven <input type="checkbox"/>	Stairs <input type="checkbox"/>	Patio _____ <input type="checkbox"/>	Garage # of cars _____
Trim/Finish	_____	Condition _____	Disposal <input type="checkbox"/>	Drop Stair <input type="checkbox"/>	Deck _____ <input type="checkbox"/>	Attached _____
Bath Floor	_____	COOLING	Dishwasher <input type="checkbox"/>	Scuttle <input type="checkbox"/>	Porch _____ <input type="checkbox"/>	Detached _____
Bath Wainscot	_____	Central _____	Fan/Hood <input type="checkbox"/>	Floor <input type="checkbox"/>	Fence _____ <input type="checkbox"/>	Built-In _____
Doors	_____	Other _____	Microwave <input type="checkbox"/>	Heated <input type="checkbox"/>	Pool _____ <input type="checkbox"/>	Carport _____
		Condition _____	Washer/Dryer <input type="checkbox"/>	Finished <input type="checkbox"/>		Driveway _____

Additional features (special energy efficient items, etc.): _____

Condition of the improvements, depreciation (physical, functional, and external), repairs needed, quality of construction, remodeling/additions, etc.: _____

Adverse environmental conditions (such as, but not limited to, hazardous wastes, toxic substances, etc.) present in the improvements, on the site, or in the immediate vicinity of the subject property: _____

COST APPROACH

ESTIMATED SITE VALUE = \$ _____

ESTIMATED REPRODUCTION COST-NEW OF IMPROVEMENTS:

Dwelling _____ Sq. Ft. @\$ _____ = \$ _____

_____ Sq. Ft. @\$ _____ = _____

_____ = _____

Garage/Carport _____ Sq. Ft. @\$ _____ = _____

Total Estimated Cost New = \$ _____

Less Physical Functional External

Depreciation _____ = \$ _____

Depreciated Value of Improvements = \$ _____

"As-is" Value of Site Improvements = \$ _____

INDICATED VALUE BY COST APPROACH = \$ _____

Comments on Cost Approach (such as, source of cost estimate, site value, square foot calculation and for HUD, VA and FmHA, the estimated remaining economic life of the property):

SALES COMPARISON ANALYSIS

ITEM	SUBJECT	COMPARABLE NO. 1			COMPARABLE NO. 2			COMPARABLE NO. 3		
Address										
Proximity to Subject										
Sales Price	\$		\$		\$		\$		\$	
Price/Gross Liv. Area	\$	<input checked="" type="checkbox"/>	\$	<input checked="" type="checkbox"/>	\$	<input checked="" type="checkbox"/>	\$	<input checked="" type="checkbox"/>	\$	
Data and/or Verification Sources										
VALUE ADJUSTMENTS	DESCRIPTION	DESCRIPTION	+ (-) \$ Adjustment	DESCRIPTION	+ (-) \$ Adjustment	DESCRIPTION	+ (-) \$ Adjustment			
Sales or Financing Concessions										
Date of Sale/Time										
Location										
Leasehold/Fee Simple										
Site										
View										
Design and Appeal										
Quality of Construction										
Age										
Condition										
Above Grade	Total Bdrms Baths	Total Bdrms Baths		Total Bdrms Baths		Total Bdrms Baths				
Room Count										
Gross Living Area	Sq.Ft.	Sq.Ft.		Sq.Ft.		Sq.Ft.				
Basement & Finished Rooms Below Grade										
Functional Utility										
Heating/Cooling										
Energy Efficient Items										
Garage/Carport										
Porch, Patio, Deck, Fireplace(s), etc.										
Fence, Pool, etc.										
Net Adj. (total)		<input type="checkbox"/> + <input type="checkbox"/> -	\$	<input type="checkbox"/> + <input type="checkbox"/> -	\$	<input type="checkbox"/> + <input type="checkbox"/> -	\$			
Adjusted Sales Price of Comparable			\$		\$		\$			

Comments on Sales Comparison (including the subject property's compatibility to the neighborhood, etc.):

RECONCILIATION

ITEM	SUBJECT	COMPARABLE NO. 1			COMPARABLE NO. 2			COMPARABLE NO. 3		
Date, Price and Data Source for prior sales within year of appraisal										

Analysis of any current agreement of sale, option, or listing of the subject property and analysis of any prior sales of subject and comparables within one year of the date of appraisal:

INDICATED VALUE BY SALES COMPARISON APPROACH \$ _____

INDICATED VALUE BY INCOME APPROACH (If Applicable) Estimated Market Rent \$ _____ /Mb. x Gross Rent Multiplier _____ = \$ _____

This appraisal is made "as is" subject to the repairs, alterations, inspections or conditions listed below subject to completion per plans and specifications.

Conditions of Appraisal: _____

Final Reconciliation _____

The purpose of this appraisal is to estimate the market value of the real property that is the subject of this report, based on the above conditions and the certification, contingent and limiting conditions, and market value definition that are stated in the attached Freddie Mac Form 439/Fannie Mae Form 1004B (Revised _____).

I (WE) ESTIMATE THE MARKET VALUE, AS DEFINED, OF THE REAL PROPERTY THAT IS THE SUBJECT OF THIS REPORT, AS OF _____ (WHICH IS THE DATE OF INSPECTION AND THE EFFECTIVE DATE OF THIS REPORT) TO BE \$ _____.

APPRAISER: _____ SIGNATORY APPRAISER (ONLY IF REQUIRED): _____

Signature _____ Signature _____ Did Did Not

Name _____ Name _____ Inspect Property

Date Report Signed _____ Date Report Signed _____

State Certification # _____ State _____ State Certification # _____ State _____

Or State License # _____ State _____ Or State License # _____ State _____