

Desktop Underwriter Property Inspection Report

File No. _____

THIS PROPERTY INSPECTION REPORT IS INTENDED FOR USE BY THE LENDER/CLIENT FOR A MORTGAGE FINANCE TRANSACTION ONLY.

SUBJECT	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 <input type="checkbox"/>			
	Neighborhood or Project Name _____		Project Type <input type="checkbox"/> PUD <input type="checkbox"/> Condominium		HOA\$ _____		/Mo. _____	
NEIGHBORHOOD	Property rights <input type="checkbox"/> Fee Simple <input type="checkbox"/> Leasehold <input type="checkbox"/>		Map Reference _____		Census Tract _____			
	Location <input type="checkbox"/> Urban <input type="checkbox"/> Suburban <input type="checkbox"/> Rural <input type="checkbox"/>		Property values <input type="checkbox"/> Increasing <input type="checkbox"/> Stable <input type="checkbox"/> Declining		Single family housing		Condominium housing	
	Built up <input type="checkbox"/> Over 75% <input type="checkbox"/> 25-75% <input type="checkbox"/> Under 25%		Demand/supply <input type="checkbox"/> Shortage <input type="checkbox"/> In balance <input type="checkbox"/> Over supply		PRICE \$ (000)		AGE (yrs)	
	Growth rate <input type="checkbox"/> Rapid <input type="checkbox"/> Stable <input type="checkbox"/> Slow		Marketing time <input type="checkbox"/> Under 3 mos. <input type="checkbox"/> 3-6 mos. <input type="checkbox"/> Over 6 mos.		Low		Low	
	Neighborhood boundaries _____				High		High	

Does the site generally conform to the neighborhood in terms of size and shape? Yes No If No, describe: _____

Does the property conform to zoning regulations? Yes No If No, describe: _____

Does the present use represent the highest and best use of the property as improved? Yes No If No, describe: _____

SITE	Utilities	Public	Other	Public	Other	Off-site Improvements	Type	Public	Private
	Electricity	<input type="checkbox"/>	Water	<input type="checkbox"/>	Street		<input type="checkbox"/>	<input type="checkbox"/>	
Gas	<input type="checkbox"/>	Sanitary sewer	<input type="checkbox"/>	Alley	<input type="checkbox"/>	<input type="checkbox"/>			

Do the utilities and off-site improvements conform to the neighborhood? Yes No If No, describe: _____

Are there any apparent adverse site conditions (easements, encroachments, special assessments, slide areas, etc.)? Yes No If Yes, describe: _____

Source(s) used for physical characteristics of property: Exterior inspection from street Previous appraisal files Assessment and tax records

MLS Prior inspection Property owner Other (Describe): _____

No. of Stories	Type (Det./Att.)	Exterior Walls	Actual Age (Yrs.)	Manufactured Housing	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Does the property generally conform to the neighborhood in terms of style, condition, and construction materials? Yes No If No, describe: _____

Are there any apparent physical deficiencies or conditions that would affect the soundness or structural integrity of the improvements or the livability of the property? Yes No If Yes, describe: _____

Are there any apparent adverse environmental conditions (hazardous wastes, toxic substances, etc.) present in the improvements, on the site, or in the immediate vicinity of the subject property? Yes No If Yes, describe: _____

CERTIFICATION AND LIMITING CONDITIONS	APPRAISER'S CERTIFICATION: The appraiser certifies and agrees that:	
	1. I personally inspected from the street the subject property and neighborhood.	
	2. I stated in this report only my own personal unbiased, and professional analysis, opinions, and conclusions, which are subject only to the contingent and limiting conditions specified in this form.	
	3. I have not knowingly withheld any significant information and I believe, to the best of my knowledge, that all statements are true and correct.	
	4. I have no present or prospective interest in the property that is the subject of this report, and I have no present or prospective personal interest or bias with respect to the participants in the transaction.	
	5. I have no present or contemplated future interest in the subject property, and neither my current or future employment nor my compensation for performing this inspection is contingent on the outcome of the inspection.	
	SUPERVISORY APPRAISER'S CERTIFICATION: If a supervisory appraiser signed this report, he or she certifies and agrees that, I directly supervise the appraiser who prepared this report, agree with the statements and conclusions of the appraiser, agree to be bound by the appraiser's certifications numbered 4 and 5 above, and am taking full responsibility for this report.	
	CONTINGENT AND LIMITING CONDITIONS: The above certification is subject to the following conditions: The appraiser has noted in this report any adverse conditions (such as, but not limited to, needed repairs, the presence of hazardous substances, etc.) observed during the exterior inspection of the subject property and neighborhood. Unless otherwise stated in this report, the appraiser has no knowledge of any hidden or unapparent conditions of the property or adverse environmental conditions that would make the property more or less valuable, and has assumed that there are no such conditions and makes no guarantees or warranties, expressed or implied, regarding the condition of the property. The appraiser will not be responsible for any such conditions that do exist or for any engineering or testing that might be required to discover whether such conditions exist. Because the appraiser is not an expert in the field of environmental hazards, this report must not be considered as an environmental assessment of the property.	
	APPRAISER:	SUPERVISORY APPRAISER (ONLY IF REQUIRED):
	Signature: _____	Signature: _____
Name: _____	Name: _____	
Company Name: _____	Company Name: _____	
Company Address: _____	Company Address: _____	
Date of Report/Signature: _____	Date of Report/Signature: _____	
State Certification #: _____	State Certification #: _____	
or State License #: _____	or State License #: _____	
State: _____	State: _____	
Expiration Date of Certification or License: _____	Expiration Date of Certification or License: _____	
	<input type="checkbox"/> Did <input type="checkbox"/> Did not inspect subject property from street	