

# Property Inspection Report

Section L — Information provided by Servicer

Sections I, A, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11 — Information provided by Inspector

## L. Loan Information

Name of Mortgage	Servicer	FNMA Loan Number	Servicer Loan Number
Property Address	Property Type <input type="checkbox"/> Single Family <input type="checkbox"/> 2-4 Family <input type="checkbox"/> Condo/PUD <input type="checkbox"/> Cooperative <input type="checkbox"/> Manufactured <input type="checkbox"/> Vacant Lot	Key Code	Lockbox
If manufactured home, is it permanently attached to the foundation? <input type="checkbox"/> Yes <input type="checkbox"/> No VIN#	Reason for Inspection <input type="checkbox"/> Collections <input type="checkbox"/> Foreclosure <input type="checkbox"/> Loss Mitigation <input type="checkbox"/> Bankruptcy/Litigation		

## I. Inspector Information

Date of Inspection	Inspected By Name:	Title:	Phone Number:
Inspection Company		Inspector Signature	

## A. Access

Were you able to complete an Interior Inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, indicate why. <input type="checkbox"/> Incorrect Key Code <input type="checkbox"/> Incorrect/Missing Lock Box	Did lockbox combo or key code provided work? <input type="checkbox"/> Yes <input type="checkbox"/> No If no but were able to gain access, what was the correct key code/lock box?	If an inspection wasn't able to be completed, select why: <input type="checkbox"/> Unable to locate <input type="checkbox"/> Bad Address <input type="checkbox"/> Unable to access: <input type="checkbox"/> Gate <input type="checkbox"/> Security <input type="checkbox"/> Other
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## 1. General Information

1.1 What is the occupancy status? <input type="checkbox"/> Vacant <input type="checkbox"/> Abandoned <input type="checkbox"/> Occupied  1.2 If occupied, property occupied by: <input type="checkbox"/> Owner <input type="checkbox"/> Tenant <input type="checkbox"/> Unknown  1.3 Are there any postings, notices or signage that would indicate that the property has incurred a code violation? <input type="checkbox"/> Yes <input type="checkbox"/> No  1.4 If yes, violation for: <input type="checkbox"/> Exterior Debris <input type="checkbox"/> Yard Maintenance <input type="checkbox"/> Pool <input type="checkbox"/> Fence <input type="checkbox"/> Boarding <input type="checkbox"/> Structural Issues <input type="checkbox"/> Condemnation <input type="checkbox"/> Demo <input type="checkbox"/> Other (Provide further detail in Section 7.5)	1.5 Violation(s) dated:  1.6 Has the issue cited on the notice/violation been resolved? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown  1.7 Items present at property: <input type="checkbox"/> For Sale Sign <input type="checkbox"/> Abandoned Vehicle(s) <input type="checkbox"/> Exterior Damages <input type="checkbox"/> Animals/Pets (Provide further detail/realtor info in Section 7.5)  1.8 Are there any potential hazards at the property that could damage an adjoining property? <input type="checkbox"/> Yes <input type="checkbox"/> No (Provide description in Section 7.5)	1.9 Is the exterior maintained by an HOA? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown  1.10 Is the property connected to sewer or Septic? <input type="checkbox"/> Sewer <input type="checkbox"/> Septic <input type="checkbox"/> Unknown
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## 2. Main Structure

2.1 How many doors are boarded? <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> >=3  2.2 How many exterior doors broken? <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> >=3  2.3 How many exterior doors need to be secured? <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> >=3  2.4 How many windows are boarded? <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> >=5  2.5 How many windows are broken? <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> >=5  2.6 Are any shutters in need of repair? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2.7 Are there damages to the foundation? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  2.8 Do any decks and/or porches appear to be unacceptable/unsafe? <input type="checkbox"/> Yes <input type="checkbox"/> No  2.9 Are handrails damaged/missing where there are 3 or more steps? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  2.10 Any damaged gutters or disconnected gutters? <input type="checkbox"/> Yes <input type="checkbox"/> No  2.11 Any damaged downspouts and extensions or disconnected downspouts/extensions? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2.12 Are there any drainage concerns? <input type="checkbox"/> Yes <input type="checkbox"/> No  2.13 Does any crawl spaces/vents/lines need to be secured/covered? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A  2.14 Are any drain pipes missing or damaged? <input type="checkbox"/> Yes <input type="checkbox"/> No  2.15 Is there a tarp on the roof of the main dwelling? <input type="checkbox"/> Yes <input type="checkbox"/> No  2.16 Is there any obvious roof damage (missing shingles, holes, damaged stack pipes, sagging roof trusses, damaged shingles, fascia boards or soffits) requiring repair? <input type="checkbox"/> Yes <input type="checkbox"/> No
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## 3. Detached Structures

3.1 Are there any tarps on the roofs of any detached structures? <input type="checkbox"/> Shed <input type="checkbox"/> Garage <input type="checkbox"/> Barn <input type="checkbox"/> Other <input type="checkbox"/> N/A  3.2 Are any detached structures boarded? <input type="checkbox"/> Shed <input type="checkbox"/> Garage <input type="checkbox"/> Barn <input type="checkbox"/> Other <input type="checkbox"/> N/A  3.3 Do any detached structures need to be secured? <input type="checkbox"/> Shed <input type="checkbox"/> Garage <input type="checkbox"/> Barn <input type="checkbox"/> Other <input type="checkbox"/> N/A	3.4 Do any exterior surfaces on any detached structures need repair? <input type="checkbox"/> Shed <input type="checkbox"/> Garage <input type="checkbox"/> Barn <input type="checkbox"/> Other <input type="checkbox"/> N/A  3.5 Does roof on any detached structures require repair? <input type="checkbox"/> Shed <input type="checkbox"/> Garage <input type="checkbox"/> Barn <input type="checkbox"/> Other <input type="checkbox"/> N/A	3.6 Are any detached structures in disrepair? <input type="checkbox"/> Shed <input type="checkbox"/> Garage <input type="checkbox"/> Barn <input type="checkbox"/> Other <input type="checkbox"/> N/A  3.7 Is any graffiti on the any detached structures? <input type="checkbox"/> Shed <input type="checkbox"/> Garage <input type="checkbox"/> Barn <input type="checkbox"/> Other <input type="checkbox"/> N/A
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4. Pool		
4.1 Is there a pool/hot tub present? Check all that apply: <input type="checkbox"/> In Ground Pool <input type="checkbox"/> Above Ground Pool <input type="checkbox"/> Hot Tub/Spa <input type="checkbox"/> Other <input type="checkbox"/> N/A	4.2 Does the pool/hot tub need to be treated? <input type="checkbox"/> In Ground Pool <input type="checkbox"/> Above Ground Pool <input type="checkbox"/> Hot Tub/Spa <input type="checkbox"/> Other <input type="checkbox"/> N/A	4.4 Is the fence/gate/lanai surrounding the pool/hot tub damaged? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
	4.3 Does the pool/hot tub need to be properly secured by a fence/gate/lanai? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	4.5 Is the pool/hot tub equipment missing? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

5. Yard		
5.1 Is there debris in the yard? <input type="checkbox"/> Yes <input type="checkbox"/> No	5.4 Does the lawn need maintenance? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	5.6 Do trees and bushes need to be trimmed back from the structure? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
5.2 Is there personal property in the yard? <input type="checkbox"/> Yes <input type="checkbox"/> No	5.5 Does the property have overgrown weeds or invasive plants? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	5.7 Does the lawn need edging? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
5.3 Does fencing around property need repair? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		5.8 Are all paved areas free and clear of snow and ice? <input type="checkbox"/> Yes <input type="checkbox"/> No

6. Utilities		
6.1 Which utility meters are present? <input type="checkbox"/> Electric Meter <input type="checkbox"/> Gas Meter <input type="checkbox"/> Water Meter	6.3 Are there any shared utilities? <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Water <input type="checkbox"/> Other <input type="checkbox"/> N/A	
6.2 Of the meters present, which are running? <input type="checkbox"/> Electric Meter <input type="checkbox"/> Gas Meter <input type="checkbox"/> Water Meter <input type="checkbox"/> N/A	6.4 Does the water need to be turned off at the curb? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

7. General - Exterior		
7.1 Are there any environmental concerns? If yes, include in Comments. <input type="checkbox"/> Yes <input type="checkbox"/> No	7.3 Is there an above ground propane gas tank on the property? <input type="checkbox"/> Yes <input type="checkbox"/> No	7.5 Required Repairs - Exterior <input type="checkbox"/> Yes <input type="checkbox"/> No
7.2 Is there an inoperable or leaking above ground heating oil tank on the property? <input type="checkbox"/> Yes <input type="checkbox"/> No	7.4 Is there graffiti on exterior of property or on interior that is visible from exterior? (Provide supporting photo and description in Section 7.6) <input type="checkbox"/> Yes <input type="checkbox"/> No	

7.6 Comments - General Description of Exterior

8. Kitchen/Bathrooms/Utility		
8.1 Is Built-In Microwave present? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.7 Is Ventilation Hood present? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.12 Are toilets missing? <input type="checkbox"/> Yes <input type="checkbox"/> No
8.2 Is Cook Top present? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.8 Is Clothes Washer/Dryer present? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.13 Are tubs/showers missing? <input type="checkbox"/> Yes <input type="checkbox"/> No
8.3 Is Dishwasher present? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.9 Are Other Appliances present? (Provide description in Section 10.14) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.14 Are any plumbing fixtures or plumbing missing? <input type="checkbox"/> Yes <input type="checkbox"/> No
8.4 Is Garbage Disposal present? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.10 Is GFCI missing in wet areas? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.15 Are water heater(s) missing? <input type="checkbox"/> Yes <input type="checkbox"/> No
8.5 Is Range present? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.11 Are components of HVAC units missing (inside and out)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.16 Is the electrical breaker panel missing/damaged? <input type="checkbox"/> Yes <input type="checkbox"/> No
8.6 Is Refrigerator present? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		

9. Basement		
9.1 Is a crock present for a sump pump? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	9.3 If sump pump not operational, check all that apply: <input type="checkbox"/> Damaged <input type="checkbox"/> Electric Off <input type="checkbox"/> Missing <input type="checkbox"/> N/A	
9.2 Is the sump pump operational? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	9.4 Does the basement appear to have water penetration? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

## 10. General - Interior

<p>10.1 Is there Personal Property in the house? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>10.2 Are electric cover plates missing or wires uncapped? <input type="checkbox"/> Missing Electric Cover Plates <input type="checkbox"/> Uncapped wires <input type="checkbox"/> N/A</p> <p>10.3 Do the floors have holes, trip hazards or anything that might cause personal injury? (Provide description in Section 10.14) <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>10.4 If discoloration present, does it appear to be causing further damages? Check all areas that apply: <input type="checkbox"/> Floors <input type="checkbox"/> Walls <input type="checkbox"/> Ceilings <input type="checkbox"/> N/A</p> <p>10.5 Are there holes present? Check all areas that apply: <input type="checkbox"/> Floors <input type="checkbox"/> Walls <input type="checkbox"/> Ceilings <input type="checkbox"/> N/A</p> <p>10.6 Does the attic appear to have damage? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>10.7 Does there appear to be a rodent/insect infestation? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>10.8 Winterization Status: <input type="checkbox"/> Winterized <input type="checkbox"/> Not Winterized <input type="checkbox"/> Compromised <input type="checkbox"/> N/A</p>	<p>10.9 Does the water need to be turned off at the main interior? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>10.10 Is there raw/perishable garbage present? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>10.11 Which detectors are present? Check all that apply. <input type="checkbox"/> Smoke Detectors <input type="checkbox"/> CO2 Detectors <input type="checkbox"/> N/A</p> <p>10.12 Which detectors are functioning properly: <input type="checkbox"/> Smoke Detectors <input type="checkbox"/> CO2 Detectors <input type="checkbox"/> N/A</p> <p>10.13 Are there any required repairs? (Provide description in Section 10.14) <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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10.14 Comments - General Description of Interior

## 11. General Condition

<p>11.1 Are there signs of insurable damages? Check all that apply: <input type="checkbox"/> Fire <input type="checkbox"/> Vandalism <input type="checkbox"/> Wind <input type="checkbox"/> Theft <input type="checkbox"/> Water</p> <p>11.2 How would you characterize the neighborhood? <input type="checkbox"/> Improving <input type="checkbox"/> Stable <input type="checkbox"/> Declining</p> <p>11.3 How does the property compare to neighborhood standards? <input type="checkbox"/> At <input type="checkbox"/> Above <input type="checkbox"/> Below</p>	<p>11.4 General Condition of Property</p> <p><input type="checkbox"/> C1—great condition no work needs to be done to the property—newer construction</p> <p><input type="checkbox"/> C2—very minor work needed to bring property up to good condition—mechanicals intact</p> <p><input type="checkbox"/> C3—older home but needs repairs to bring up to code and current conditions</p> <p><input type="checkbox"/> C4—older home, may have some roof or structural issues, outdated, out of code, needs mechanicals</p> <p><input type="checkbox"/> C5—significant damage to home, work required is significant but could be done</p> <p><input type="checkbox"/> C6—home is a candidate for demolition</p>
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- L Loan Information
- I Inspector Information
- A Access
- 1 General Information
- 2 Main Structure
- 3 Detached Structures
- 4 Pool
- 5 Yard
- 6 Utilities
- 7 General - Exterior
- 8 Kitchen / Bathrooms / Utility
- 9 Basement
- 10 General - Interior
- 11 General Condition

Inspection Type	Required Sections	Required Photos
Curbside	L, I, A, 1, 2, 3, 4, 5, 6, 7, 11	Street View, Address, Front
Exterior Only	L, I, A, 1, 2, 3, 4, 5, 6, 7, 11	Street View, Address, Front, Back, Left Side, Right Side, Deficiencies, Violations/Notices Posted
Interior / Exterior	L, I, A, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11	Street View, Address, Front, Back, Left Side, Right Side, Interior Rooms, Deficiencies, Violations/Notices Posted

**Photo Requirements**— Use only clear, focused, color photos. Photos must remain clear at a dimension of 3 ½" x 5". A complete view must be used (that is, color photos of the entire area). A date stamp is required on each photo showing the original date the photo was taken.