

CMA – RESIDENTIAL INCOME WORKSHEET

Date:

Property Address _____ City/ZIP _____
Owner Name(s) _____
Owner Address _____ City/ZIP _____
Home Phone _____ Cell _____ Office _____
Fax _____ email _____
Other _____
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PROPERTY INFORMATION

Property Address _____ City/Zip _____ County _____
Sq. footage/based on _____ / _____ Lot Size/based on _____ / _____ Age _____
Bedrooms _____ Baths _____ Partial baths _____ Family Room _____ Other _____
Rooms _____
Living Room _____ AC/Heat _____ Garage _____ Basement _____
Amenities _____
Additions/remodeling: _____ Permits used: _____
Other Significant Features _____

Summarize the significant features of your home:

Any existing reports? [e.g., pest, physical, roof, foundation, pool, etc.] _____

Has the property been on the market previously (currently)? Y / N
Initial List Price \$ _____ Most Recent Price \$ _____ Expected Sales Price \$ _____
Owners assessment of the current value \$ _____ Need a Rent-Back _____
How Long in home _____ Year purchased _____ Reason for CMA _____
Age/Type of roof _____ Age of furnace _____ Age of water heater _____
Personal property included _____
Slides, foundation, other problems _____ Unusual Lot Line _____
Easement(s) _____ Significant upgrades in home _____

RESIDENTIAL INCOME PROPERTY:

No. of units _____ Size of units _____
Tenants: Lease or Month-to-Month _____ Who pays utilities _____
Rents/Monthly _____ Annual Rents _____
Expenses _____ Property Manager _____
All units rented _____ Recent upgrades _____
Current litigation _____ Rent control _____ No. of Parking Spaces _____
Garage/Off Street Parking _____ Storage area _____ Laundry _____

Notes

