



CMA Request Form

Requested By _____ Date _____

Tax Id Number (Parcel Number) OR MLS# _____

Property Address _____

*The * information is required - the rest is optional.*

*Lot Size _____

*Sq Ft Above Ground _____

*Basement Sq Ft _____

*% of Finished Basement _____

*# of Bedrooms _____

*Bathrooms - Full or 3/4 _____

*Bathrooms - 1/2 _____

*Family Room _____

*Exterior _____

*Garage _____

*Carport _____

*Year Built _____

*Busy Street (Front) _____

*Busy Street (Back) _____

*Fireplace – Main _____

*Fireplace – Up _____

*Fireplace – Down _____

Heating _____

Air Conditioning _____

Patio _____

Deck _____

Alarm System _____

Ceiling Fan _____

Counter Top Grill _____

Club House _____

Compactor _____

Counter Top Range _____

Cable T.V. _____

Central Vacuum _____

Disposal _____

Dishwasher _____

Electric Air Cleaner _____

Garden _____

Garage Door Opener _____

Handicapped _____

Hardwood Floors _____

Horse Property _____

Hot Tub/Whirlpool _____

Humidifier _____

Home Warranty _____

Intercom _____

Insulated Windows _____

Microwave Oven _____

Pool _____

Refrigerator _____

Range _____

RV Parking _____

Sauna _____

Satellite Dish _____

Secluded Area _____

Storage _____

Tennis _____

Trees _____

TV Antenna _____

Wet Bar _____

WB Stove - No FP _____

Wall Oven _____

Water Softener _____

Fencing full partial none

Landscape full partial none

Sprinkler full man part man full auto

Owner's Name _____

Owner's Address _____

***Manual Adjustments

Agent Signature

Loan Officer Authorization