

Reason for inspection

- Delinquency       REO  
 Foreclosure       Other \_\_\_\_\_

Servicer Name		Seller/Servicer Number	
Servicer Address		City	State      Zip Code
Freddie Mac Loan Number		Servicer Loan Number	
Borrower Name		Co-Borrower Name	
Property Address		City	State      Zip Code

*If there is no change to report in any particular section, check the "No Change" box for that section.*

**SECTION A**

Property Type    1-unit    2-4 unit    Condominium    Manufactured Home    Other    Specify \_\_\_\_\_

If the property is a Manufactured Home: Is the property permanently attached to the foundation?    Yes    No

Single wide    Yes    No      Double wide    Yes    No

**SECTION B**

Improvements

Does the property generally conform to the neighborhood in terms of style, condition and construction materials?    Yes    No

Are there any adverse environmental conditions (hazardous waste, mold, toxic substances, etc.) present in the improvements, on the site or in the immediate vicinity of the property?    Yes    No    If yes, please provide specific information and identify items needing immediate attention.

**SECTION C**

No change

Property occupied by    Owner    Tenant    Unknown    Vacant    Abandoned

If property is occupied by a tenant, tenant's name \_\_\_\_\_ Monthly rent \_\_\_\_\_

Rent paid to whom? \_\_\_\_\_ Term of lease \_\_\_\_\_

**SECTION D**

No change

Is property listed for sale?

Yes    No

If yes, Broker's Name

Broker's Phone Number

(   )   -

**SECTION E**

No change

Is house locked and secure?

Yes    No

Is house winterized?

Yes    No

Do you have keys to the house?

Yes    No

Is there personal property in house?

Yes    No

**SECTION F**

No change

Condition of interior       Excellent       Good       Fair       Poor       Interior Inaccessible

Condition of exterior       Excellent       Good       Fair       Poor

Overall property condition       Excellent       Good       Fair       Poor

If "fair" or "poor" condition, explain

Deferred maintenance (attach list if necessary)

Capital Repairs needed (attach list if necessary)

Are repairs in progress?    Yes    No

Are photographs attached?    Yes    No

**SECTION G**

No change

Person interviewed on-site

Relationship to borrower

Summary of findings from on-site interview including, if applicable, reason for delinquency and borrower's intentions, whereabouts, and home and work telephone numbers

Summary of instructions left for borrower

Not applicable

**SECTION H**  No change

Comments and/or recommendations

Name of Inspection Company

Check here if Servicer employee performed inspection

Inspector's Name

Servicer Contact Name

Date of Report

Inspector's Signature

Servicer Phone Number

Date of Inspection

Date of previous inspections