

PMI
Brokers Price Opinion

PMI Cert. # _____ Distance from office to Property: _____

Address: _____ Agent: _____ Phone: _____

City/St./Zip: _____ Company Name: _____

Yearly Taxes: _____ Assessed Value: _____ Year Built: _____

Subject Property (all areas must be filled out if applicable)											
Style	Sq. Ft.	Rms.	BR	baths	Fam	Gar	Age	Days on mkt	Original list price	Current list price	Financing

What is the general condition of the property?

Marketability of Subject (positives, negatives, recommendations – comments on location, architectural style, floor plan, economic conditions, etc.)

Most Recent Comparable Sales															
Address	Style	Sqft.	rms	Bed rms	Ba	fam	gar	Age	Miles to sbj	DOM	List price	Sales date	Sale Price	Finan	
1.															
2.															
3.															
4.															

Special Features of the Above Properties

Properties Currently Offered															
Address	Style	Sqft.	rms	bed rms	Ba	fam	gar	Age	Miles to sbj	DOM	List Price	Sale Date	Sale Price	Finan	
1.															
2.															
3.															
4.															

Comments:

Subject Property:				
	Highest	Lowest	Probable Final	Est. Selling Time
As Is				
Repaired				

Recommended Financing: Conv: ___ FHA: ___ VA: ___ Other: _____

Condominium Info Association/Management Company: _____

Address: _____

Total # of Units: _____ % of owner occupied units: _____ Amt. Of Mo. Dues: _____

Any other special Assessments: _____

Approved Financing: Conv. ___ VA: ___ FHA: ___ Other: _____

Agent Comments: _____

Date of BPO: _____ **Signature of Agent:** _____