

UAD PROPERTY UPDATES

KITCHEN					
	<1 Year	1 – 5	6 – 10	11 – 15	Notes (materials used etc.)
Cabinets					
Counter Tops					
Dishwasher					
Built-in Microwave					
Other					
Other					

BATH ROOMS																
	Owners Bath				Bath 1				Bath 2				Half Bath			
	<1	1-5	6-10	11-15	<1	1-5	6-10	11-15	<1	1-5	6-10	11-15	<1	1-5	6-10	11-15
Sink/Vanity																
Toilet																
Tub/Shower																
Other																
Notes																
Notes																

ADDITIONAL Above Grade Non-UAD UPDATES	
Flooring	LR _____ Kitchen _____ DR _____ Nook _____ FamR _____ Study _____ MBR _____ BR1 _____ BR2 _____ BR3 _____ BR4 _____ Hall/Stairs _____ MBath _____ Bath1 _____ Bath2 _____ Half Bath _____ Other _____
Windows	<input type="checkbox"/> All <input type="checkbox"/> Kitchen <input type="checkbox"/> LR <input type="checkbox"/> DR <input type="checkbox"/> Nook <input type="checkbox"/> Study <input type="checkbox"/> FamR <input type="checkbox"/> Other _____ <input type="checkbox"/> MBR <input type="checkbox"/> BR1 <input type="checkbox"/> BR2 <input type="checkbox"/> BR3 <input type="checkbox"/> BR4 <input type="checkbox"/> MBath <input type="checkbox"/> Bath 1 <input type="checkbox"/> Bath2 <input type="checkbox"/> HBath1 <input type="checkbox"/> HBath2
<input type="checkbox"/> Roof <input type="checkbox"/> Gutters/Downspout <input type="checkbox"/> Vinyl Siding <input type="checkbox"/> Plumbing <input type="checkbox"/> Electric <input type="checkbox"/> Heating <input type="checkbox"/> Central Air <input type="checkbox"/> Water Heater <input type="checkbox"/> Porch _____ <input type="checkbox"/> Patio _____ <input type="checkbox"/> Deck _____ <input type="checkbox"/> Ext Door(s) _____ <input type="checkbox"/> Int Door(s) _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____	

BASEMENT (Below Grade) Non-UAD UPDATES

CONDITIONS / IMPROVEMENTS
<input type="checkbox"/> C1 New Construction/No Deterioration <input type="checkbox"/> C2 Mostly Updated & Like New/No Repairs Needed <input type="checkbox"/> C3 Some Updates/Well Maintained/Functional <input type="checkbox"/> C4 Adequately Maintained/Minimal Repairs Needed <input type="checkbox"/> C5 Deferred Maintenance/Needs Some Repairs <input type="checkbox"/> C6 Substantial Damage/Lots of Repairs Needed

Data Source _____

Date _____