

SINGLE FAMILY COMPARABLE RENT SCHEDULE

This form is intended to provide the appraiser with a familiar format to estimate the market rent of the subject property. Adjustments should be made only for items of significant difference between the comparables and the subject property.

| ITEM | SUBJECT | COMPARABLE NO. 1 | | | COMPARABLE NO. 2 | | | COMPARABLE NO. 3 | | |
|---|-------------------------|-------------------|--------------------|--|-------------------|--------------------|--|-------------------|--------------------|--|
| Address | | | | | | | | | | |
| Proximity to Subject | | | | | | | | | | |
| Date Lease Begins Date Lease Expires | | | | | | | | | | |
| Monthly Rental | If Currently Rented: \$ | \$ | | | \$ | | | \$ | | |
| Less: Utilities Furniture | \$ | \$ | | | \$ | | | \$ | | |
| Adjusted Monthly Rent | \$ | \$ | | | \$ | | | \$ | | |
| Data Source | | | | | | | | | | |
| RENT ADJUSTMENTS | DESCRIPTION | DESCRIPTION | +(-) \$ Adjustment | | DESCRIPTION | +(-) \$ Adjustment | | DESCRIPTION | +(-) \$ Adjustment | |
| Rent Concessions | | | | | | | | | | |
| Location/View | | | | | | | | | | |
| Design and Appeal | | | | | | | | | | |
| Age/Condition | | | | | | | | | | |
| Above Grade Room Count | Total Bdrms Baths | Total Bdrms Baths | | | Total Bdrms Baths | | | Total Bdrms Baths | | |
| Gross Living Area | Sq. Ft. | Sq. Ft. | | | Sq. Ft. | | | Sq. Ft. | | |
| Other (e.g., basement, etc.) | | | | | | | | | | |
| Other: | | | | | | | | | | |
| Net Adj. (total) | | + - \$ | | | + - \$ | | | + - \$ | | |
| Indicated Monthly Market Rent | | \$ | | | \$ | | | \$ | | |

Comments on market data, including the range of rents for single family properties, an estimate of vacancy for single family rental properties, the general trend of rents and vacancy, and support for the above adjustments. (Rent concessions should be adjusted to the market, not to the subject property.)

Final Reconciliation of Market Rent:

I (WE) ESTIMATE THE MONTHLY MARKET RENT OF THE SUBJECT AS OF _____ 19____ TO BE \$ _____

Appraiser(s) SIGNATURE _____
NAME _____

Review Appraiser SIGNATURE _____
(If applicable) NAME _____

This form must be reproduced by the Seller.