MOBILE HOME VALUATION WORKSHEET

Email to: tfpamobilehome@twia.org

Agent Name & Phone Number: ________________________________ (required)

Location address of Dwelling: ________________________________ (required)

Client Name: ________________________________________________ (required)

Year of Mobile Home: ______ (required)  Manufacturer of Home: ________________ (required)

Model of Home: ________________________________________________ (required)

Serial #: ______________________________________________________ (required)

Width/Length: _______ (required)  Single-Wide: _____ or Double-Wide: ______ (required)

Additional Features:

Carport: Attached  □  Detached □  Square footage: __________

Garage: Attached □  Detached □  Square footage: __________

House type roofing (shingles not metal): Yes □  No □

Central Air Conditioning System: □  OR  # of window Air Conditioning Units: ______

Wood Deck with Rails: Yes □  No □

Skirting? Yes □

If other than Vinyl or Metal, advise what product was used to skirt the mobile home: __________

Interior Components:  Check or complete all that apply.

Shower Stall □  Garden Tub □  Garden tubs with Jets □

Kitchen Countertops: Laminate □  Tile □  Granite □  Marble □

Floor Coverings:
Ceramic Tile square footage: __________
Hardwood Flooring square footage: __________
Laminate Flooring square footage: __________

Cathedral / Vaulted Ceilings □  How many rooms: ______

Kitchen Upgraded Appliances:
Refrigerator size (cubic ft.): ______  Cooktop & Oven □  Dishwasher □  Microwave Oven □

Permanent Fireplace: □

Additional rooms added onto dwelling? Total Square Footage _________________