

Home Style Work Write-Up

Consultant's Report

Prepared By

Metro Inspections

5730 West 39th Street
St. Louis Park, MN 55416
(952) 931-1153
metroinspections@usfamily.net



Inspection Date

11/12/2014

Client's Name: Bob Sample

Inspected Address: 3424 Example Homestyle
Excelsior MN 55418

Client's Phone: (612) 502-3314

Client's Email: bobsample@gmail.com

Lender: Wintrust Mortgage

Address: 1915 Plaza Drive, Suite 201
Eagan, MN 55122

Phone:

Loan Officer: Dave Sawicki

Phone: (651) 406-5008 **Ext:**

Metro Inspections

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St. Louis Park, MN 55416

Phone: (952) 931-1153

Fax: (866) 823-2565

Consultant: Thomas L. Swanson Email: metroinspections@usfamily.net



Certification Letter

Home Style

Date: 1/2/2017

Buyer's Name: Bob Sample

Address: 3313 Sumpter Avenue North
Brooklyn Park, MN 55418

Phone Number: (612) 502-3314

FHA Case Number:

I hereby certify that I have carefully inspected the following property at: **3424 Example Homestyle
Excelsior MN 55418**

for compliance with the general acceptability requirements (including health and safety) in Handbook 4905.1 or its successors.

I have reviewed the attached architectural exhibits and the estimated rehabilitation costs of this property, and have determined them to be acceptable.

I have no personal interest, present or prospective, in the property, applicant, or proceeds of the mortgage.

To the best of my knowledge I have reported all items requiring correction and that the rehabilitation proposal now meets all HUD requirements for 203(k) Rehabilitation Mortgage Insurance (Handbook 4240.4 or its successors).

X Thomas L. Swanson Date: 01/02/2017

HUD Consultant: Thomas L. Swanson
ID Number: D0650

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Consultant's Identity-Of-Interest Certification

Borrower's Name(s)	Bob Sample
Property Address	3424 Example Homestyle Excelsior MN 55418
FHA Case No.	

"I hereby certify that I have carefully inspected this property for compliance with the general acceptability requirements (including health and safety) in Handbook 4905.1. I have required as necessary and reviewed the architectural exhibits, including any applicable engineering and termite reports, and the estimated rehabilitation cost and they are acceptable for the rehabilitation of the property. I have no personal interest, present or prospective, in this property, applicant or proceeds of the mortgage. I also certify that I have no identity-of-interest or conflict-of interest with the borrower, seller, lender, realtor, appraiser, plan reviewer, contractor or subcontractor. To the best of my knowledge, I have reported all items requiring correction and that the rehabilitation proposal now meets all HUD requirements for Rehabilitation Mortgage Insurance."

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.

(18 U.S.C. 1001, 1010, 1012; 31 U.S.C 3729, 3802).

Thomas L. Swanson

Date: 01/02/2017

Consultant/Plan Reviewer's Signature:

Consultant: Thomas L. Swanson D0650

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Consultant's Allowable Fee Agreement

Prepared for: **Bob Sample**

Address: **3313 Sumpter Avenue North
Brooklyn Park, MN 55418**

Lender: Wintrust Mortgage

Loan Originator: Dave Sawicki

Loan Type: Home Style

This agreement is entered on _____, between Thomas L. Swanson (CONSULTANT) and

Bob Sample (BUYER) regarding the subject property: **3424 Example Homestyle
Excelsior MN 55418**

For the sum(s) specified the CONSULTANT agrees to:

1) Meet with Borrower(s) and /or Borrower(s)' Agent(s) and/or Contractor(s) at the subject property address to inspect the physical property, identify areas in need of improvement, and determine overall suitability for FHA's 203(k) Rehabilitation Mortgage Program. A feasibility fee will be due and payable upon completion of these services. This fee will be fully credited toward the Total Consultant Fee (below) should Borrower(s) decide to continue the application process. This fee is non-contingent and non-refundable. If upon initial examination it is determined quickly that the needed repairs are unfeasible for the Borrower(s) and/or excessively expensive, the Consultant will NOT perform a full Home Inspection and no additional payment will be necessary.

2) With Borrower(s)' input, Consultant will list work items that: A) must be done according to the Program; B) would be recommended to be done at this time by the Consultant or others, and; C) are desired by Borrower(s). From this list, Consultant and Borrower(s) will jointly determine the scope of the work.

3) Produce appropriate documentation in a HUD accepted format, with Draw Request. It is understood that any architectural exhibits do not include certified architectural drawings. If such drawing becomes necessary, all extra costs will be the responsibility of the borrower.

For performing the above services, Borrower(s) agrees to pay Consultant the total sum down below at the time of service (which includes the charge for item #1 above) which is based on HUD's recommended fee schedule. This amount may be reimbursed to the borrower at closing.

If additional testing services are necessary, these services will either be provided by the Consultant or qualified sub-contractors agreed to by both the Consultant and the Borrower; however, the charges for these testing services are in addition to the above Consultant fee. The Consultant will try to estimate all extra charges in advance (see below), and may schedule the additional testing for the borrower(s). The charges, however, will be the sole responsibility of the Borrower(s), and will be due and payable at the time of service.

Additional Testing Services or Certifications that may be necessary and their estimated charges:

Allowable Fee Items

Allowable Fee Item	Fee Item Note	Fee
Draw Fee	5 @ 150	\$750.00
Independent Consultant	Consultant Fee	\$1,000.00
Permits (Elec, plbg, frame,hvac)	Permit Fees	\$1,800.00

Fees To Be Paid: \$3,550.00

Lender's assurance of payment for balance due is acceptable with Signature (below).

X _____ Date: _____
If guaranteeing payment, Signature of Authorized Official of the Lender

X _____ Date: _____
Borrower: **Bob Sample**

X *Thomas L. Swanson* Date: **01/02/2017**

Consultant: Thomas L. Swanson ID No.: D0650

Draw Request

U.S. Department of Housing and Urban Development

OMB Approval No. 2502-0527 (exp. 9/30/2014)

Home Style

Office of Housing

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

This information collection involves an expanded information requirement for lenders that originate and service Section 203(k) mortgages. The purpose of the information is to help mitigate program abuses. The expanded information focuses on the loan origination process and requires increased documentation and strengthened internal control procedures. Periodic reporting of the information is not required. The information also includes information that was voluntarily accepted by the 203(k) lending community. The information provides a more comprehensive basis for evaluating lender underwriting practices and thereby improves risk management of the 203(k) loan portfolio. Responses are required to obtain benefits under Section 203(k) of the National Housing Act (12 U.S.C. 1703). No assurance of confidentiality is provided.

Borrower's Name & Property Address Bob Sample 3424 Example Homestyle Excelsior MN 55418	Lender's Name & Address Wintrust Mortgage 1915 Plaza Drive, Suite 201 Eagan, MN 55122	FHA Case Number	
		This Draw Number Initial	Date

I certify that I have carefully inspected this property for compliance with the general acceptability requirements (including health and safety) in Handbook 4905.1. I have reviewed the attached architectural exhibits and the estimated rehabilitation costs listed in column 1 below; they are acceptable for the rehabilitation of this property. I have no personal interest, present or prospective, in the property, applicant, or proceeds of the mortgage. To the best of my knowledge, I have reported all items requiring correction and that the rehabilitation proposal now meets all HUD requirements for 203(k) Rehabilitation Mortgage Insurance.

HUD-Accepted Consultant / Plan Reviewer's Signature & Date X Thomas L. Swanson Metro Inspections 01/02/2017	Suggested Contingency Reserve Amount \$18,853.00 10%
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	Construction Item	Total Escrow Col. 1	Total Cost of Rehabilitation		Request for This Draw		Inspector/Lender Adjusted Amounts		
			Previous Draw Totals Col. 2	%	Col. 3	%	Col. 4	%	
1 .	Masonry	\$23,270.00							1 .
2 .	Siding	\$10,370.00							2 .
3 .	Gutters/Downspouts	\$0.00							3 .
4 .	Roof	\$10,350.00							4 .
5 .	Shutters	\$0.00							5 .
6 .	Exteriors	\$0.00							6 .
7 .	Walks	\$0.00							7 .
8 .	Driveways	\$0.00							8 .
9 .	Painting (Ext.)	\$0.00							9 .
10 .	Caulking	\$0.00							10 .
11 .	Fencing	\$0.00							11 .
12 .	Grading/Landscaping	\$1,130.00							12 .
13 .	Windows	\$0.00							13 .
14 .	Weatherstrip	\$0.00							14 .
15 .	Doors (Ext.)	\$2,390.00							15 .
16 .	Doors (Int.)	\$0.00							16 .
17 .	Partition Wall	\$84,390.00							17 .
18 .	Plaster/Drywall	\$5,720.00							18 .
19 .	Decorating	\$0.00							19 .
20 .	Wood Trim	\$3,300.00							20 .
21 .	Stairs	\$0.00							21 .
22 .	Closets	\$0.00							22 .
23 .	Wood Floors	\$0.00							23 .
24 .	Finished Floors	\$2,950.00							24 .
25 .	Ceramic Tile	\$7,460.00							25 .
26 .	Bath Accessories	\$2,050.00							26 .
27 .	Plumbing	\$7,080.00							27 .
28 .	Electrical	\$6,390.00							28 .
29 .	Heating	\$5,120.00							29 .
30 .	Insulation	\$7,170.00							30 .
31 .	Cabinetry	\$9,390.00							31 .
32 .	Appliances	\$0.00							32 .
33 .	Basements	\$0.00							33 .
34 .	Cleanup	\$0.00							34 .
35 .	Miscellaneous	\$0.00							35 .
36 .	Totals	\$188,530.00							36 .

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.(18 U.S.C. 1001,1012;31 U.S.C. 3729,3802)

This draw request is submitted for payment. All completed work has been done in a workmanlike manner. I hereby certify to the actual cost of rehabilitation as shown above in column 3. I understand that I cannot obtain additional monies from the rehabilitation account without the approval of the lender. I also understand that a 10% holdback will not be released until all work is complete and it is determined that no mechanic's and materialmen's liens have been placed on the property. After the final inspection, the monies in escrow account will be distributed as required by the 203(k) program procedures.

Borrower's Signature Owner-Occupied Investor-Builder **X** _____ Date _____

This draw request is submitted for payment. All completed work has been done in a workmanlike manner. I understand that a 10% holdback will not be released until all work is completed and it is determined that no mechanic's and materialmen's liens have been placed on the property.

General Contractor's Signature (If any) **X** _____ Date _____

I certify that I have carefully inspected this property on this date. The draw amounts are acceptable except as modified in column 4. I further certify that I have not accepted any work that is not yet completed in a workmanlike manner and I recommend that the rehabilitation escrow funds be released for the completed work.

Inspector's Signature **X** *Thomas L. Swanson* I.D. Number **D0650** Date **01/02/2017**

Approved for Release	This Draw	Totals to Date	The Lender is hereby authorized to release the following funds from the escrow account.	
Total from Above	\$	\$	Payable to the Borrower	Payable to the Fee Inspector
			\$	
Less 10% Holdback	\$	\$	Payable To	\$
Net Amount Due Borrower	\$	\$	Signature & Date	
			<input type="checkbox"/> Lender-Authorized Agent <input type="checkbox"/> DE Underwriter X	

Lender Holding Rehabilitation Escrow Account (name, address, & phone number)

- Originating Lender Sill Retains Funds
 Rehab Funds Transferred to:

Rehabilitation Inspection Report _____ FHA Case Number _____

I. Inspection of On-Site Repairs and/or Improvements Reveals:

- | | |
|--|--|
| 1. <input type="checkbox"/> Unable To Make Inspection. (explained Below) | 3. <input type="checkbox"/> No noncompliance observed. |
| 2. <input type="checkbox"/> Correction essential as explained below. | 4. <input type="checkbox"/> Acceptable variations as described below. |
| a. <input type="checkbox"/> Will examine at next inspection. | 5. <input type="checkbox"/> On-site improvements acceptably completed. |
| b. <input type="checkbox"/> Do not conceal until reinspected. | |

II. Explanation of statements checked above.

- Draw Inspection Contingency Reserve Inspection Final Inspection Change Order Other (explain)

Inspection Number

No.		No.	

Certification: I certify that I have carefully inspected this property on this date. I have no personal interest, present or prospective, in the property, applicant, or proceeds of the mortgage. To the best of my knowledge, I have reported all noncompliance, work requiring correction, and unacceptable work. I also certify that this Draw Request is for completed work and I have not accepted any work that is not properly installed in a workmanlike manner.

Signature & Date **X** *Thomas L. Swanson* 01/02/2017 Consultant/Inspector Fee Inspector DE Staff Inspector Inspector Fee ID Number **D0650**

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Consultant: Thomas L. Swanson Email: metroinspections@usfamily.net

Consultant's ID No: D0650



Specification Of Repairs

Inspection Date: 11/12/2014

Occupied During Construction: Occupied

Months To Completion: 6

Borrower: Bob Sample
Property Address: 3424 Example Homestyle Excelsior MN 55418
Phone: (612) 502-3314
Contact Name:
Contact Phone:
Applicant's Phone: (612) 502-3314
Applicant's Cell Phone:

FHA Case #:
Loan Type: Home Style
Loan No.:
Lender: Wintrust Mortgage
Lender's Address: 1915 Plaza Drive, Suite 201 Eagan, MN 55122
Loan Originator: Dave Sawicki
Loan Originator Phone: (651) 406-5008

<u>Bob Sample</u>	<u>Wintrust Mortgage</u>	<u>FHA Case #</u>	<u>Consultant's File No.</u>	<u>Dated</u>
3424 Example Homestyle Excelsior MN 55418	1915 Plaza Drive, Suite 201 Eagan, MN 55122		3424	1/2/2017

STEP-BY-STEP PROCEDURE

- HUD accepted consultant who prepares this work write-up (or an architect, engineer or home inspection service) needs to inspect the property to assure: (1) That there are no rodents, termites and other infestations: (2) that there are no defects that will affect the health and safety of the occupants: (3) the adequacy of the existing structural, heating, plumbing electrical and roofing system: and (4) the upgrading of thermal protection (where necessary). The inspection report will be attached to the document.
- Complete each item below as necessary by either filling out the information on the work to be preformed with a brief explanation, or entering "NONE" in the "SUB-TOTAL" Portion if no work is being performed in that particular subsection to the document.
- The proposed work, and the materials used, should be explained in detail to assure a complete understanding on the required work by the contractor and the HUD authorized fee inspector. For major items (ie. kitchen cabinets, appliances, heating air conditioning etc.), the description or the item should enclose the make and model number (manufacturer's) brochure can be attached).
- Attach a copy of any proposals from all contractors and/or subcontractors.
- Provide other drawings as necessary to assure a complete understanding of the required work by the contractor and the HUD authorized fee inspector. The following architectural exhibits are required:
 - A Plot Plan of the Site is required only if a new addition is being made to the existing structure. Show the location elevations at the property corners and building structure(s), walks, drives, streets, and other relevant detail. Include finished grade corners to assure proper drainage of water off the site. Show the required flood elevation.
 - Proposed Interior Plan of the Dwelling. Show where structural or planning changes are contemplated; include any dwelling.
 - Provide kitchen cabinet elevations, deck drawings and other exhibits as necessary to properly describe the required Architectural exhibits for a new addition are the same as for a newly constructed home.
- Cost estimates must include labor and materials sufficient to complete the work by a contractor.
- A homebuyer who would like to do any of the work must submit a letter to the lender stating his/her qualifications to perform the work in timely and workmanlike manner. If approved by the lender, the homebuyer cannot eliminate the cost estimate for labor because if the homebuyer cannot complete the work there must be sufficient money in the escrow account to get a subcontractor to do the work.
- If this is a purchase transaction and not a refinance, then attach a sales contract (the loan should go contingent upon obtaining FHA 203(k) financing).
- Transfer costs shown on the last page to the Draw Request (HUD 9746-A, VMP-436).
- Meaning of Abbreviations:
Each = Ea Linear foot = LF Square Foot = SF Lump Sum = LS Square Yard = SY * = Required

M = Mandatory By HUD, R = Recommended By Consultant/Other, D = Desired By Homeowner

1. Masonry

		Qty	Unit	Unit Cost	Total	Tax/Margin		Grand Total	
masonry		Material/LS	1	LS	0.00	0.00	0.0%	0.00	\$11,340.00
Location	Level	D	Labor	1	LS	11,340.00	11,340.00	Completion Hrs:	20
Exterior	Masonry & Excavation								
masonry		Material/LS	1	LS	0.00	0.00	0.0%	0.00	\$7,910.00
Location	Level	D	Labor	1	LS	7,910.00	7,910.00	Completion Hrs:	12
Exterior	Stone Chimney Extension								
Driveway Extension		Material/LS	1	LS	0.00	0.00	0.0%	0.00	\$4,020.00
Location	Level	D	Labor	1	LS	4,020.00	4,020.00	Completion Hrs:	0
	Drive way extension approximately 10'-00" X 35'-00"								
Sub-Total This Section:								\$23,270.00	

This work will be done by: Owner Contractor Subcontractor **Cost Estimate Attached:** **Permit Required:**

Summary/Narrative Of Work To Be Done:

Excavation/Masonry:

This project will require the following activities. Excavate foundation of 10'-00" X 22'-00" for the garage. Excavate for 20" X 10" concrete footings with two (2) #4 rebars. Verify existing footings and attach with two (2) #4 dowels. Installation of four (4) courses of 12" concrete block with #5 rebars verts and dowels at 4'-00" OC with a top course of 6" CMU with 1/2" anchor bolts with solid core fills every 4'-00", on

the north and east t side of the garage addition.

Pour four (4") slab for garage floor and 10'-00" X 22'-00" over gravel or sand fill, with #4 rebars for the garage floor, sloping away from the garage, tying into current slab. Both to be poured over 6MIL vapor barrier backfill as required and remove excess. Repair of yard is customer responsibility. Every effort will be made to minimize yard damage where traffic was present. Pour two (2) 12" X 42" footings for the front porch, removal of existing.

2). **Stone Chimney Extension:**

extend the stone on the left side of the garage, extend the stone chimney to a minimum of three feet (3') feet above the roof line within ten feet (10'-00") of the chimney.

3). **Driveway Extension:** drive way extension approximately 10'-00" X 35'-00"

Note: with the weather conditions it's anticipated that there will be additional cost for heat and cover and excavation in the neighborhood of 10% of the Excavation/Masonry Cost.

2. Siding

		Qty	Unit	Unit Cost	Total	Tax/Margin		Grand Total	
Siding		Material/LS	1	LS	0.00	0.00	0.0%	0.00	\$10,370.00
Location	Level	D	Labor	1	LS	10,370.00	10,370.00	Completion Hrs:	20
Exterior	Siding/Soffit/Fascia								
Sub-Total This Section:								\$10,370.00	

This work will be done by: Owner Contractor Subcontractor **Cost Estimate Attached:** **Permit Required:**

Summary/Narrative Of Work To Be Done:

Siding/Fascia/ Soffit

This project will require the following activities:

installation vinyl shakes to the gables of the house with the appropriate inside/outside corners.

installation of aluminum fascia and soffit as specified.

installation of vinyl siding to match existing, as required.

3. Gutters/Downspouts

4. Roof

				Qty	Unit	Unit Cost	Total	Tax/Margin		Grand Total	
New Shingle Installation				Material/LS	1	LS	0.00	0.00	0.0%	0.00	\$10,350.00
Location	Level	D	Labor	1	LS	10,350.00	10,350.00	Completion Hrs: 14			
Roof	Addition Roofing										
Sub-Total This Section: \$10,350.00											

This work will be done by: Owner Contractor Subcontractor Cost Estimate Attached: Permit Required:

Summary/Narrative Of Work To Be Done:

Roofing
 This project will require the following activities:
 installation of ice and water 6'-00" from fascia.
 colored drip edge installation of 15# roofing felt.
 installation of Timberline30 year shingles, colored valley flashing.

5. Shutters

6. Exteriors

This work will be done by: Owner Contractor Subcontractor Cost Estimate Attached: Permit Required:

Summary/Narrative Of Work To Be Done:

7. Walks

8. Driveways

9. Painting (Ext.)

10. Caulking

11. Fencing

12. Grading/Landscaping

				Qty	Unit	Unit Cost	Total	Tax/Margin		Grand Total	
Tree Removal				Material/LS	1	LS	0.00	0.00	0.0%	0.00	\$1,130.00
Location	Level	D	Labor	1	LS	1,130.00	1,130.00	Completion Hrs: 5			
Exterior	Tree Removal										
Sub-Total This Section: \$1,130.00											

This work will be done by: Owner Contractor Subcontractor Cost Estimate Attached: Permit Required:

Summary/Narrative Of Work To Be Done:

1: Tree Removal: This project will require the following activities:
 removal of existing maple tree to the left of the driveway.
 grind the stump to below. disposal of all waste.

13. Windows

14. Weatherstrip

15. Doors (Ext.)

				Qty	Unit	Unit Cost	Total	Tax/Margin		Grand Total									
Install garage door/doors				Material/LS	1	LS	0.00	0.00	0.0%	0.00	\$2,390.00								
<table border="1"> <tr> <td>Location</td> <td>Level</td> <td>D</td> <td></td> </tr> <tr> <td>Garage</td> <td>Garage Door:</td> <td></td> <td></td> </tr> </table>				Location	Level	D		Garage	Garage Door:			Labor	1	LS	2,390.00	2,390.00	Completion Hrs: 6		
Location	Level	D																	
Garage	Garage Door:																		
Sub-Total This Section:										\$2,390.00									

This work will be done by: Owner Contractor Subcontractor Cost Estimate Attached: Permit Required:

Summary/Narrative Of Work To Be Done:

Garage Door
 This project will require the following activities:
 installation of 18' -00" X 8' -00" garage door
 COST \$ 1,690.00 (this is an accurate estimate, a final cost would be determined after a final design is determined)

16. Doors (Int.)

17. Partition Wall

				Qty	Unit	Unit Cost	Total	Tax/Margin		Grand Total									
frame				Material/LS	1	LS	0.00	0.00	0.0%	0.00	\$84,390.00								
<table border="1"> <tr> <td>Location</td> <td>Level</td> <td>D</td> <td></td> </tr> <tr> <td>New Addition</td> <td>Addition Framing/Windows</td> <td></td> <td></td> </tr> </table>				Location	Level	D		New Addition	Addition Framing/Windows			Labor	1	LS	84,390.00	84,390.00	Completion Hrs: 40		
Location	Level	D																	
New Addition	Addition Framing/Windows																		
Sub-Total This Section:										\$84,390.00									

This work will be done by: Owner Contractor Subcontractor Cost Estimate Attached: Permit Required:

Summary/Narrative Of Work To Be Done:

Carpentry
 This project will require the following activities:
 Upper Level
 frame master bedroom approximately 16'-7 X 14'-00" with a closet 11'-06" X 12'-00".
 frame in seating area approximately 15' -06 " X 14'-00".
 frame master bathroom approximately 22'-06" X 12'-00.
 frame in misc. areas.
 General Construction
 2" X 6" treated sill plate
 2" X 6" SPF studs 16" OC, top and bottom plates for exterior walls.
 2" X 4" SPF studs 16" OC, top and bottom plates for interior walls unless noted.
 2" X 10" SPF floor joists for the entry level floor
 18" floor trusses over the existing house area, 19.2" OC, with T&G plywood nailed and glued.
 installation of pre-engineered attic and scissor trusses per specifications 2'-00" OC, matching specified pitch.
 installation of garage attic trusses 19.2" OC, with " T&G plywood nailed and glued with shed dormer.
 installation of roof sheathing)1/2" plywood.
 installation of wall sheathing, 3/4" Bilt-rite, with Tyvek house wrap.
 installation of headers and beams as specified.
 installation of cedar brackets on the entry level as specified
 frame in 6'-00" double steel doors into the backside of the garage
 construct a front stoop with treated material and cedar decking.

Windows - Hayfield
 Vinyl Clad Windows
 LowE insulated glass
 Brush nickel sash lock and lift
 white screen surround
 clad exterior/interior
 per window schedule - plus one for in the shed roof over the garage.

18. Plaster/Drywall

				Qty	Unit	Unit Cost	Total	Tax/Margin		Grand Total									
Drywall				Material/LS	1	LS	0.00	0.00	0.0%	0.00	\$5,720.00								
<table border="1"> <tr> <td>Location</td> <td>Level</td> <td>D</td> <td></td> </tr> <tr> <td>Interior</td> <td></td> <td></td> <td></td> </tr> </table>				Location	Level	D		Interior				Labor	1	LS	5,720.00	5,720.00	Completion Hrs: 25		
Location	Level	D																	
Interior																			
Sub-Total This Section: \$5,720.00																			

This work will be done by: Owner Contractor Subcontractor Cost Estimate Attached: Permit Required:

Summary/Narrative Of Work To Be Done:

Drywall
 This project will require the following activities:
 drywall will be installed with a combination of drywall nails and screws.
 installation of 5/8" drywall to all ceiling surfaces and firewall applications.
 installation of 1/2" drywall to all wall surfaces.
 installation of corner bead to all outside comers.
 installation of tape to all inside comers and drywall joints.
 application of three (3) layers of joint compound to all drywall surfaces.
 sand, smooth ceilings.
 COST \$ 4,590.00

19. Decorating

20. Wood Trim

				Qty	Unit	Unit Cost	Total	Tax/Margin		Grand Total									
Wood Trim				Material/LS	1	LS	0.00	0.00	0.0%	0.00	\$3,300.00								
<table border="1"> <tr> <td>Location</td> <td>Level</td> <td>D</td> <td></td> </tr> <tr> <td>Interior</td> <td></td> <td></td> <td></td> </tr> </table>				Location	Level	D		Interior				Labor	1	LS	3,300.00	3,300.00	Completion Hrs: 16		
Location	Level	D																	
Interior																			
Sub-Total This Section: \$3,300.00																			

This work will be done by: Owner Contractor Subcontractor Cost Estimate Attached: Permit Required:

Summary/Narrative Of Work To Be Done:

Millwork
 This project will require the following activities:
 installation of paint grade Princeton casing around all windows with apron and sills and around all doors installation of paint grade Princeton baseboard around the perimeter of all rooms.
 installation of six-panel primed paint grade doors:
 2'-06" pocket doors into the master bed/bathroom and closet
 1' -06" linen closet.
 installation of a hand rail for the staircase and at the landing area of the second level.
 installation of closets shelving is not included

21. Stairs

22. Closets

23. Wood Floors

24. Finished Floors

				Qty	Unit	Unit Cost	Total	Tax/Margin		Grand Total	
Finish Floors				Material/LS	1	LS	0.00	0.00	0.0%	0.00	\$2,950.00
Location	Level	D	Labor	1	LS	2,950.00	2,950.00	Completion Hrs:		10	
Interior	Interior Carpeting.										
Sub-Total This Section:										\$2,950.00	

This work will be done by: Owner Contractor Subcontractor Cost Estimate Attached: Permit Required:

Summary/Narrative Of Work To Be Done:

Carpet
 This project will require the following activities
 installation of carpet in the master bedroom seating area, closet and staircase.
 installation of tackstrips around the perimeter of the rooms,
 installation of padding and carpet
 an allowance of \$45.00/SQ. YD. is included. (this is an accurate estimate, a final cost would be determined after a final design is determined)

25. Ceramic Tile

				Qty	Unit	Unit Cost	Total	Tax/Margin		Grand Total	
Ceramic Tile Installation				Material/LS	1	LS	0.00	0.00	0.0%	0.00	\$7,460.00
Location	Level	D	Labor	1	LS	7,460.00	7,460.00	Completion Hrs:		14	
Interior	Ceramic Tile Installation										
Sub-Total This Section:										\$7,460.00	

This work will be done by: Owner Contractor Subcontractor Cost Estimate Attached: Permit Required:

Summary/Narrative Of Work To Be Done:

Ceramic Tile
 This project will require the following activities:
 General Conditions
 ceramic tile installed on the floor will be thinset installed over a self leveling or cement composite board.
 ceramic tile installed in bathtub/shower areas will be installed over cement composite board.
 installation of ceramic tile in the entry and mudroom.
 shower construction
 installation of sub pan for shower floor and 60 MIL pan liner
 installation of cement composite board, walls and ceiling
 installation of mud shower floor and curb
 all tile to be grouted per plan.
 An allowance of \$6.00/SQ. FT. is included for field tile, \$15.00/SQ.FT. for the shower floor.
 This does not include the additional cost of bullnose, accent strips and/or deco tiles. This cost does not include the additional cost of installation and or sealing of natural stones.

26. Bath Accessories

				Qty	Unit	Unit Cost	Total	Tax/Margin		Grand Total	
Bathroom fixtures and accessories				Material/LS	1	LS	0.00	0.00	0.0%	0.00	\$2,050.00
Location	Level	D	Labor	1	LS	2,050.00	2,050.00	Completion Hrs:		6	
Bath 1			Bathroom fixtures and accessories								
Sub-Total This Section:										\$2,050.00	

This work will be done by: Owner Contractor Subcontractor Cost Estimate Attached: Permit Required:

Summary/Narrative Of Work To Be Done:

Custom Glass
 This project will require the following activities:
 installation of glass panels brushed nickel/clear frameless glass surround for the master shower (this is an accurate estimate, a final cost would be determined after a final design is determined)

27. Plumbing

				Qty	Unit	Unit Cost	Total	Tax/Margin		Grand Total	
Plumbing				Material/LS	1	LS	0.00	0.00	0.0%	0.00	\$7,080.00
Location	Level	D	Labor	1	LS	7,080.00	7,080.00	Completion Hrs:		15	
Interior			Plumbing								
Sub-Total This Section:										\$7,080.00	

This work will be done by: Owner Contractor Subcontractor Cost Estimate Attached: Permit Required:

Summary/Narrative Of Work To Be Done:

Plumbing
 This project will require the following activities:
 installation of waste and venting for the master stool, vanity, shower and bathtub.
 installation of hot and cold water supplies for the different areas.
 Master Bathroom
 installation of the following plumbing products:
 Kohler Wellworth white round with plastic seat, brush nickel lever (\$260.00)
 Delta brush nickel shower/tub Monitor faucet (\$ 250.00)
 Delta brush nickel 520 lav faucet/faucet. (\$140.00/faucet)
 Kohler castiron sinks, standard colors/sink (\$150.00)
 Free standing tub and faucet (\$1,500.00)
 ceramic shower

28. Electrical

				Qty	Unit	Unit Cost	Total	Tax/Margin		Grand Total									
Electrical				Material/LS	1	LS	0.00	0.00	0.0%	0.00	\$6,390.00								
<table border="1"> <tr> <td>Location</td> <td>Level</td> <td>D</td> <td></td> </tr> <tr> <td>Interior</td> <td>Interior Electrical House/Addition</td> <td></td> <td></td> </tr> </table>				Location	Level	D		Interior	Interior Electrical House/Addition			Labor	1	LS	6,390.00	6,390.00	Completion Hrs: 12		
Location	Level	D																	
Interior	Interior Electrical House/Addition																		
Sub-Total This Section:										\$6,390.00									

This work will be done by: Owner Contractor Subcontractor Cost Estimate Attached: Permit Required:

Summary/Narrative Of Work To Be Done:

Electrical
 This project will require the following activities:
 wire to code. installation of hardwired smoke/CO detectors with battery backup one per bedroom and one per each level.- extend the mast for the service. --
 installation of phone jacks and coax cable.
 installation of wiring and switching per plan.
 installation of recessed lights (1) master shower and water closet areas and two (2) in the bath tub area and three as a walkway through the bathroom installation of circuits for the bathroom circuits, GFI outlets and exterior outlets.
 installation of all wiring and switching for bath fans, closet, ceiling and vanity lights.
 switched outlets for the seating and bedroom areas.
 three-to-four-way lighting for the staircase.
 customer to supply all surface mount, wall, ceiling fan and fan/lights.
 heated floor for the bathroom and shower areas.
 basic lighting and outlets for the garage.
 installation of Lutron's toggle/slide with dimmers for all lights, except vanity lights.

29. Heating

				Qty	Unit	Unit Cost	Total	Tax/Margin		Grand Total									
HVAC				Material/LS	1	LS	0.00	0.00	0.0%	0.00	\$5,120.00								
<table border="1"> <tr> <td>Location</td> <td>Level</td> <td>D</td> <td></td> </tr> <tr> <td>Interior</td> <td>HVAC</td> <td></td> <td></td> </tr> </table>				Location	Level	D		Interior	HVAC			Labor	1	LS	5,120.00	5,120.00	Completion Hrs: 12		
Location	Level	D																	
Interior	HVAC																		
Sub-Total This Section:										\$5,120.00									

This work will be done by: Owner Contractor Subcontractor Cost Estimate Attached: Permit Required:

Summary/Narrative Of Work To Be Done:

HVAC
 This project will require the following activities:
 utilize the existing furnace and AC.
 installation and venting of bath fan:
 Panasonic for Master bathroom and water closet.
 Duct System
 Trol-A-Temp two (3) zone control package, zoning the basement and entry level then the upper level.
 installation of three Honeywell Digital thermostats
 installation of supplies and returns to the addition and second level.

30. Insulation

				Qty	Unit	Unit Cost	Total	Tax/Margin		Grand Total									
Insulation				Material/LS	1	LS	0.00	0.00	0.0%	0.00	\$7,170.00								
<table border="1"> <tr> <td>Location</td> <td>Level</td> <td>D</td> <td></td> </tr> <tr> <td>Attic</td> <td>Insulation of addition</td> <td></td> <td></td> </tr> </table>				Location	Level	D		Attic	Insulation of addition			Labor	1	LS	7,170.00	7,170.00	Completion Hrs: 14		
Location	Level	D																	
Attic	Insulation of addition																		
Sub-Total This Section:										\$7,170.00									

This work will be done by: Owner Contractor Subcontractor

Cost Estimate Attached:

Permit Required:

Summary/Narrative Of Work To Be Done:

Insulation
 This project will require the following activities:
 Blown-in-Blanket insulation in the walls and ceilings.
 installation of R21 fiberglass insulation in all exterior walls.
 installation of R42 fiberglass insulation in the ceiling areas.
 installation of insulated rim joists.
 foam in insulation in all bypass locations from all conditioned spaces.
 foam in insulation around all window areas.
 installation of 6MIL vapor barrier, taping all seams, over all insulation.
 installation of attic baffles to provide 1 "h" air space.
 installation of roof vents and soffit vents per code.

31. Cabinetry

				Qty	Unit	Unit Cost	Total	Tax/Margin		Grand Total									
Cabinets				Material/LS	1	LS	0.00	0.00	0.0%	0.00	\$7,320.00								
<table border="1"> <tr> <td>Location</td> <td>Level</td> <td>D</td> <td></td> </tr> <tr> <td>Kitchen</td> <td>Cabinets</td> <td></td> <td></td> </tr> </table>				Location	Level	D		Kitchen	Cabinets			Labor	1	LS	7,320.00	7,320.00	Completion Hrs: 20		
Location	Level	D																	
Kitchen	Cabinets																		
Countertops				Material/LS	1	LS	0.00	0.00	0.0%	0.00	\$2,070.00								
<table border="1"> <tr> <td>Location</td> <td>Level</td> <td>D</td> <td></td> </tr> <tr> <td>Interior</td> <td>Countertops</td> <td></td> <td></td> </tr> </table>				Location	Level	D		Interior	Countertops			Labor	1	LS	2,070.00	2,070.00	Completion Hrs: 12		
Location	Level	D																	
Interior	Countertops																		
Sub-Total This Section:										\$9,390.00									

This work will be done by: Owner Contractor Subcontractor

Cost Estimate Attached:

Permit Required:

Summary/Narrative Of Work To Be Done:

1). Cabinetry
 This project will require the following activities:
 General Construction
 Paint-grade Construction
 face-frame construction
 slab/full overlay doors
 concealed hinges
 Melamine interiors drawers
 natural finish (this is an accurate estimate, a final cost would be determined after a final design is determined).

2). Granite/Quartz Countertop
 This project will require the following activities:
 measure, select and manufacture countertop.
 under mount sink with counter mounted faucet.
 polished eased edge
 installed
 back splash at additional cost
 an allowance of \$65.00/ SQ. FT. for material/labor. (this is an accurate estimate, a final cost would be determined after a final design is determined)

32. Appliances

33. Basements

34. Cleanup

Bob Sample
3424 Example Homestyle
Excelsior MN 55418

Wintrust Mortgage
1915 Plaza Drive, Suite 201
Eagan, MN 55122

FHA Case #

Consultant's File No.

Dated

3424

1/2/2017

35. Miscellaneous

This work will be done by:: Owner Contractor Subcontractor

Cost Estimate Attached:

Permit Required:

Summary/Narrative Of Work To Be Done:

CONSULTANT'S COMMENT

RECAP SUBTOTALS

Construction Sub-Totals	
1. Masonry	23,270.00
2. Siding	10,370.00
3. Gutters/Downspouts	0.00
4. Roof	10,350.00
5. Shutters	0.00
6. Exteriors	0.00
7. Walks	0.00
8. Driveways	0.00
9. Painting (Ext.)	0.00
10. Caulking	0.00
11. Fencing	0.00
12. Grading/Landscaping	1,130.00
13. Windows	0.00
14. Weatherstrip	0.00
15. Doors (Ext.)	2,390.00
16. Doors (Int.)	0.00
17. Partition Wall	84,390.00
18. Plaster/Drywall	5,720.00
19. Decorating	0.00
20. Wood Trim	3,300.00
21. Stairs	0.00
22. Closets	0.00
23. Wood Floors	0.00
24. Finished Floors	2,950.00
25. Ceramic Tile	7,460.00
26. Bath Accessories	2,050.00
27. Plumbing	7,080.00
28. Electrical	6,390.00
29. Heating	5,120.00
30. Insulation	7,170.00
31. Cabinetry	9,390.00
32. Appliances	0.00
33. Basements	0.00
34. Cleanup	0.00
35. Miscellaneous	0.00
Construction Cost Subtotal: \$188,530.00	

Allowable Fees & RecapTotals		
Construction Costs Subtotal :		\$188,530.00
ALLOWABLE FEES		
Note		Fee
Draw Fee	5 @ 150	\$750.00
Independent Consultant	Consultant Fee	\$1,000.00
Permits (Elec, plbg, frame,h	Permit Fees	\$1,800.00
Allowable Fees Total :		\$3,550.00
Contingency Reserve:		10% \$18,853.00
Grand Total:		\$210,933.00

All repairs must be performed in conformance with local zoning ordinances and codes.
 Applicant(s) and Contractor (if any) to sign and date upon final acceptance.

Date of Final Acceptance: _____

Consultant/Plan Reviwer: Thomas L. Swanson Date: 01/02/2017 Thomas L. Swanson ID No: D0650

Applicant(s): _____ Date: _____ Applicant(s): _____ Date: _____

Applicant(s): _____ Date: _____ Applicant(s): _____ Date: _____

Contractor: _____ Date: _____

PERMITS AND/OR CERTIFICATIONS REQUIRED

Inspection Date: 11/12/2014

Borrowers Name: Bob Sample

Loan No. _____

Property Address: 3424 Example Homestyle
Excelsior MN 55418

Permit(s) are required to begin work on the repairs outlined in the Specification of Repairs (Work Write up). Copies of the permit **MUST BE ATTACHED** to the first draw request for renovation funds to be disbursed.

Certification(s) are required after work has been completed. Copies of the certifications **MUST BE ATTACHED** to the final draw request for renovation funds to be disbursed.

PLEASE CHECK ALL OF THE APPROPRIATE BOXES THAT APPLY FOR THE PROJECT ON THE ABOVE REFERENCED LOAN:

Permit Required Prior To First Draw	Certification Required After Work Complete
<input checked="" type="checkbox"/>	General Building Permit <input type="checkbox"/>
<input checked="" type="checkbox"/>	HVAC <input type="checkbox"/>
<input checked="" type="checkbox"/>	Roofing <input type="checkbox"/>
<input type="checkbox"/>	Well <input type="checkbox"/>
<input checked="" type="checkbox"/>	Electrical <input type="checkbox"/>
<input checked="" type="checkbox"/>	Plumbing <input type="checkbox"/>
<input type="checkbox"/>	Septic <input type="checkbox"/>
<input type="checkbox"/>	Lead Asbestos <input type="checkbox"/>
<input type="checkbox"/>	Termite (Clearance) <input type="checkbox"/>
<input type="checkbox"/>	Other: <input type="checkbox"/>
<input type="checkbox"/>	Not Required for the Project <input type="checkbox"/>

Thomas L. Swanson
Consultant's Signature

01/02/2017
Date

Thomas L. Swanson
Consultant Printed Name

.....

BORROWER(S) CERTIFICATION:

I (We) understand that I (We) am responsible for obtaining the required permits and city/local building authority inspections for the above items., and that no monies will be released from the rehab escrow account for the items requiring permits until I have provided a copy of the draw request documentation

Borrower's Signature

Date

Borrower's Signature

Date

Contractor's Signature

Date