



Trio reviews all executed purchase and sale agreement ("PSA") for conformance with its requirements based on submission date. Real estate professionals working with Trio Customers should complete this form along with an agent prepared Comparative Market Analysis ("CMA") with a submitted home for financing with Trio. Further guidance is available for real estate professionals at trioresidential.com or by contacting us at partners@thinktrio.com.

Trio Customer _____ Cust ID #: _____
 Property Address: _____
 Agent Name: _____ Phone #: _____ Email: _____
 Date of PSA Acceptance: _____ Closing Date: _____
 List Price: \$ _____ Property Taxes: \$ _____
 Negotiated Price: \$ _____ Property Tax ID: _____
 CMA Value (by Agent): \$ _____ HOA Dues: \$ _____ Monthly Yearly
 Earnest Money: \$ _____ HOA Rental Restrictions: Yes or No
 Year Built: _____ Interior Sq Ft: _____
 Bed / Bath: _____ / _____ New Construction: Yes or No

Trio Contract Requirements (Check if Conforms with Requirements):

- Meets Trio Maximum Approved Payment**
 (Equal or Lower than Trio Customer Approval and Trio Area Approved Maximum)
- FHA Financing Contingency Included**
- Buyer's agent has confirmed with listing agent that NO other FHA appraisal has been ordered for this property in the last six months.** Yes No
- Trio Assignment Addendum or Assignment Language Included**
- Home Inspection Included. Copy Provided to Trio:** Yes No
 Unresolved Issues: _____
- Seller Paid Home Warranty.** Yes No; If yes, amount paid: \$ _____
- Home Type:** SFH TH Condo; If older than 10 years old, Renovated in last 10 years
 Age of: _____ Roof; _____ HVAC; _____ Plumbing; Roof Certification if Older than 10 Years Yes No
- Targeted 3% Price Seller Credit for Closing Costs.**
 Amount of Concession: \$ _____. Percentage of List Price: ____%
 If not met in contract, how will the minimum be paid?
 Trio Customer \$ _____; Agent Commission \$ _____; Other \$ _____

If a Trio prescribed requirement is not met, the following is the proposed resolution:

Items Included:

- Stove/Range Refrigerator Dishwasher Microwave Washer Dryer Fireplace Insert Wood Stove
 Security System Attached Television Attached Speakers Satellite Dish/Operating equipment Hot Tub Pool
 Other _____

Closing Agent: Closing Office: _____

Closer Name: _____ Phone: _____ Email: _____

Submitted By: _____ (Agent) Date: _____

Agent Phone #: _____ Email Address: _____