



**Your Company Name**  
 Company Street Address  
 Company City, State & Zip  
 (phone) / (fax)  
 Prepared By: Registered User's Name

**QUALITATIVE FEATURE RATINGS**  
 Prepared For: (client's name appears here when registered)

SCORE OF BUILDING ( Lowest = 1 / Highest = 5 )

NO. FEATURE:	WEIGHT (1 - 10)	SAMPLE BUIDLING 1	SAMPLE BUILDING 2	SAMPLE BUILDING 3	SAMPLE BUILDING 4	SAMPLE BUILDING 5
1 Location	8	5	4	3	2	1
2 Access	6	5	4	3	2	1
3 Public Transportation	4	3	3	3	3	5
4 Image	10	2	5	4	3	3
5 Views	8	1	4	5	3	3
6 Amenities	6	2	3	2	2	4
7 Food Accessibility	4	2	2	3	5	4
8 Parking - Tenant	6	4	4	2	3	5
9 Parking - Visitor	6	4	4	2	3	5
10 Other -	0					
11 Suite Location	8	3	3	5	4	2
12 Configuration	10	3	4	3	5	2
13 Expansion Ability	8	1	3	3	4	2
14 Security	6	1	2	2	3	2
15 Property Management	6	3	4	5	2	3
16 Building Ownership	6	3	4	5	2	3
Weighted Average Score (100 Possible)		55	73	68	62	56

