

Request Appraisal

Lender Information:

Lender/Client name: _____ Order date: _____

Address: _____

Loan Officer Contact Info:

Name: _____ Email: _____

Phone: _____ Fax: _____

Type of Appraisal:

___ URAR/Full Appraisal 1004

___ Condo

___ Exterior/Drive By 2070, 2075

___ Rent Schedule/Operating income statement

___ Interior 2055

___ Land

___ Final Inspection

___ Other: _____

Borrower/Applicant Information

Name _____

Address _____

Reason for Appraisal:

___ Purchase

___ Refinance

Loan amount: _____ Sales Price: _____ Estimated value: _____

Listing agent: _____

Property Information:

Property Type: ___ Primary Residence ___ Second Home ___ Investment Property

Address to be appraised: _____

City: _____ Zip: _____ County: _____

Contact Info:

Contact name: _____ Home #: _____ Work #: _____

Cell #: _____ Best time to contact: _____

Payment Method:

Invoice: ___

C.O.D. ___

Due Date: _____