



AM APPRAISALS INC.

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ORDER FORM

PLEASE PRINT

DATE: _____ ORDERED BY: _____

BROKER/BANK: _____ LENDER: _____

PHONE: _____ FAX: _____

E-MAIL: _____

PROPERTY ADDRESS: _____

COUNTY: _____

SALES PRICE / ESTIMATED VALUE: _____

PAYMENT METHOD:

_____ COD _____ PAY VIA INVOICE

APPRAISAL TYPE:

_____ URAR _____ CONDO _____ 2-4 FAMILY

_____ 2055 w/ INTERIOR _____ 2055 _____ 704

_____ RENT SCHEDULE _____ OPERATING INCOME STATEMENT

_____ LAND OTHER: _____

CONTACT PHONE NUMBERS

BORROWER / BUYER: _____

_____ (HOME) _____ (WORK)

_____ (OTHER)

REALTOR / CONTRACTOR: _____

_____ (HOME) _____ (WORK)

_____ (OTHER)

COMMENTS: _____
