

Bain & Associates, Inc.

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APPRAISAL REQUEST

Date Ordered: _____

Client: _____ Processor/Loan Officer _____

Client Address: _____

Phone: _____ Fax: _____

Client Email: _____

Property Address: _____

City: _____

Legal: _____

Buyer/Owner (circle one): _____

Sale Price: \$ _____ Loan Amount: \$ _____

Refinance (Yes / No) (circle one) Number Originals Required: _____

Value Estimate If Refinance: \$ _____

Report Type (circle one): URAR / FHA / Condo / 2055 Interior / 2055 Exterior / 2075 Drive-By

2075 Interior / Final Inspection / Construction Draw / FHA Compliance Inspection / Other

Listing Agent: _____ Phone: () _____

Selling Agent: _____ Phone: () _____

Builder: _____ Phone: () _____

Owner/Seller: _____ Phone: () _____

Fee: \$ _____ Pick Up Check: Yes / No (circle one)

Special Instructions: _____

Appraiser: _____ File # _____

Delivery: Email / Appraisal Port / Courier / Overnight Delivery / Mail (circle one)

Overnight Delivery Carrier / Account Number: _____

DUE DATE (IMPT!): _____

Fax To (972) 398-2538

Order an appraisal on-line at <http://www.dallasappraisal.com>