

**James Earp Appraisal Service
Appraisal Request Form**

Company: _____
Company Address _____
E-mail (where to send appraisal): _____
Contact: _____ **Phone:** _____

Property Information

Customer Name: _____

Property Address: _____

City: _____ **State:** _____ **Zip:** _____

Legal Description: _____

Sales Price: _____

Owner's Estimate for Refinance: _____

Seller's Concessions: _____ **Home Phone:** _____

Contract Date: _____ **Business Phone:** _____

Please attach a copy of contract if available

Contact Information

Listing company/Seller:

Agent: _____

Phone: _____

**Type of appraisal needed: 1004 - URAR – FHA - CONDO FORM - 2055 - 2075
2070 - 2-4 Family – Final inspection (Please circle service requested)**

Additional comments: _____

We adhere to FNMA and Freddie Mac Guidelines and are governed by the Independent fee Appraisers ethics and standards.

**1420 Crete Drive, Raleigh N.C. 27606
Phone: (919) 362-5387 Fax: (919) 362-0287
Cell Phone: (919) 795-7389**