ABLE APPRAISAL, INC.

Full Service Appraising

P: (702) 636-2093
F: (702) 636-2094
beebster1@lvcoxmail.com

Don Beebe Jr. / Principal
313 Fuchia Circle
Las Vegas, NV 89107
NV A.0004097-CR

Date of Order_____

Company Name: (To appear as CLIENT on Report)
Address:
Telephone:
Fax:

Contact: *(You or person ordering report)*_____

Direct Phone #_____***Cell #***_____

Your E-mail address:

E-Mail Report To:

Delivery of report is made via E-mail unless other arrangements are made.

Address of Subject Property:_____

_____

Owner's Name: _____

☐ **Owner Occupied** ☐ **Tenant Occupied**

Owner's & Occupant Home #_____**Cell #**_____

Work (Other) #_____

Borrower's Name:_____

Type of Appraisal: (circle one)

1004-Full Custom
1004-Full Sale
1004 Full Refinance
1073- Condo/P.U.D.
2055-Drive By/Exterior only
RUSH
Cost Approach with Site Value

****442 – Certificate of Completion**
(For New Construction scheduled upon completion)**

Multi-Family (Up to Four Units)
Residential Rental Survey
Operating Income Statement
Cost Approach without Site Value

For Commercial Pricing please contact Don Beebe

Purpose of Appraisal: (circle one): Sale Refinance Other_____

Sales Price: _____

Payment Options: **C.O.D.** Homeowner Seller Buyer
MASTERCARD / VISA

Payment Comments _____

(If paying by credit card please provide name, billing address, card #, exp date and the 3 digit # (CVV2/CVC2) located on the back of the card.)

Terms of Acceptance: Please *be aware that the purpose of an appraisal is to establish a value,* which cannot be done without first examining the scope of work necessary and completing the appraisal process. Furthermore, it is also understood that any estimate of value, as stated on this order form, is not and will not be a 'condition' regarding the request for service. If you intend it to be a 'condition' for performing this order, "I cannot accept the assignment because it violates professional ethics." Per USPAP 2007 Edition.

(This appraisal is being accepted as a NON-FRT loan, unless otherwise stated in writing.)
*****I accept full responsibility for the appraisal fee in the event escrow does not close or pay within 30 days. *****

Terms Accepted by:

_____ _____
Signature *(Required)* Date

_____
Print Name & Title

Revised 05/2007