



ASC Professionals, LLC
Appraisals, Sales, & Consulting

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For Office Use Only
File Number:

APPRAISAL ORDER FORM

GEORGIA LICENSE NUMBER:				DATE:			
COMPANY NAME:							
ORDERED BY:							
ADDRESS:							
CITY:		STATE:		ZIP:			
PHONE:				Alternate Phone:			
EMAIL:							
<u>PROPERTY TO BE APPRAISED</u>							
BORROWER:							
PROPERTY ADDRESS:							
CITY:		STATE:		GA		ZIP:	
COUNTY:		SUBDIVSN:					
PHONE (H):		PHONE (W)					
PHONE (C):		EMAIL:					
<u>ENTRY or CONTACT INFORMATION</u>							
CONTACT / who:							
HOME PHONE:				WORK/CELL PH:			
<u>TRANSACTION DETAILS</u>							
SALE ___ REFINANCE ___ 2nd MORTGAGE ___ EQUITY LINE ___ (check one)							
<i>IF THIS IS A SALE, PLEASE FAX A COPY OF THE SALES CONTRACT WITH THE ORDER.</i>							
PLEASE ENTER THE SALE PRICE OR YOUR BEST ESTIMATE OF FAIR MARKET VALUE:							
\$		BASED ON:					
PLEASE CHECK TYPE OF APPRAISAL: Re-Assignment to a new mortgage company.							
___ SFR (1004-Full)		___ Condominium			___ Single Family Rental		
___ 2055-Interior		___ Land Only			___ 1004 FHA		
___ 2055-Exterior		___ 2-4FamilyResidential(Duplex)			___ Other		
FEE PAYMENT ARRANGEMENTS							
→ Client/Borrower Pays COD (Cash/Money Order/Check) Fee Quoted ? Client/Borrower Signature _____							

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