

# Request for Appraisal

<b>To:</b> CHANTAL GRIFFIN GRIFFIN APPRAISALS 211 HAWTHORNE AVE. MILL VALLEY, CA 94941 (P) 415-381-6992 (F) 415-383-4997 (C) 415-302-7890 EMAIL: CHANTAL@GRIFFINAPPRAISALS.NET	<b>From (Name &amp; Address):</b> Name: Address: City/State: Phone Number:
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<b>Applicant (Name &amp; Address):</b> Only applicable for loan purposes	<b>Lender (Name &amp; Address):</b> Only applicable for loan purposes
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<b>Authorized by (Signature):</b>	<b>Title:</b>	<b>Date:</b>
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<b>Property Type:</b> <input type="checkbox"/> Detached <input type="checkbox"/> Attached <input type="checkbox"/> Condo <input type="checkbox"/> PUD <input type="checkbox"/> 2-4 Unit	<b>Occupancy Status:</b> <input type="checkbox"/> Primary Residence <input type="checkbox"/> Second Home <input type="checkbox"/> Investment Property No. of Units _____	<b>If Loan, Type:</b> <input type="checkbox"/> Conventional <input type="checkbox"/> FHA <input type="checkbox"/> Other _____	<b>Purpose:</b> <input type="checkbox"/> Date of Death <input type="checkbox"/> Insurance <input type="checkbox"/> Market Value <input type="checkbox"/> Estate Planning <input type="checkbox"/> Tax Appeal	<input type="checkbox"/> Divorce <input type="checkbox"/> Purchase <input type="checkbox"/> Refi <input type="checkbox"/> Bankruptcy <input type="checkbox"/> Construction <input type="checkbox"/> Other _____
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**Property Address:**

**Legal Description (if known):**

<b>Listing Agent (if applicable):</b>	<b>Selling Agent (if applicable):</b>
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**Appraisal Type:**  
 Interior (Full)     Exterior Only     Rental Survey     Income Operating Statement

**Estimate of Value Should Be:**    **Appraisal Cost:**    **Date Needed By:**  
 As Is     Subject to Plans     As of date: \_\_\_\_\_

**E-mail Appraisal to:**

**Contact for Entry** (if not the same "From" listed above):

**Comments:**