

Report Description

ASSIGNMENT INFORMATION	CLIENT _____ LENDER _____ APPRAISER _____ SUPERVISOR _____		FILE NUMBERING			
	Order Date _____ Due Date _____ Priority _____ Loan Amount _____ Job Type _____ Sale Price _____ Property Type _____ Sale Date _____ Loan Type _____ Refinance _____ Form Type _____ Owner Est. Val. _____ Property Rights Appraised <input type="checkbox"/> Fee Simple <input type="checkbox"/> Leasehold <input type="checkbox"/> Other (describe) _____		Internal Order Number _____ Lender Case Number _____ Client File Number _____ FHA/VA Case Number _____ Main File Number on form _____ Other File Number on form _____			
	BILLING & DELIVERY SUMMARY		INVOICE NUMBER _____ INVOICE DATE _____			
	PROPERTY ADDRESS		ORDERED BY _____ BILL TO _____ Preferred Payment Method _____ Base Fee _____ \$ _____ SHIP TO _____			
PROPERTY	City _____ State _____ Zip Code _____ County _____ APN _____ Legal Description _____ Map Ref. _____ Tax Yr. _____ Taxes _____ Special _____ Year Blt. _____ Tot. Rms. _____ Tot. Bdrms. _____ Tot. Baths. _____ Sq.Ft. _____					
	Instructions from Client		Exceptions, Releases, Etc.			
INSPECTION CONTACTS & ACCESS INFORMATION			Name	Work Phone	Home Phone	Mobile
	BORROWER		_____	_____	_____	_____
	CO-BORROWER		_____	_____	_____	_____
	OWNER		_____	_____	_____	_____
	OCCUPANT		_____	_____	_____	_____
	AGENT		_____	_____	_____	_____
	Appointment Date _____ Time _____ Appointment Notes _____ _____ _____		<input type="checkbox"/> Owner Occupied <input type="checkbox"/> Pets on Property <input type="checkbox"/> Call Occupant First <input type="checkbox"/> Tenant Occupied <input type="checkbox"/> Lock Box <input type="checkbox"/> Hostile Occupant <input type="checkbox"/> Vacant <input type="checkbox"/> Appointment Required <input type="checkbox"/> New Construction <input type="checkbox"/> Key With Agent			
	Scheduled By _____ # of Attempts _____ Appointment Contact _____		Access Notes			
			Directions to Property			
			_____ _____ _____			