

Graham & Associates, Inc. Real Estate Appraisers

# Appraisal Request Form

Phone:(512) 754-7440  
209 Pat Garrison  
PO Box 84  
San Marcos, TX 78667-0084

ALL BLANKS MUST BE FILLED IN

**Please fax to: (512) 754-7442. A representative will call you at the number you indicate below.**

Today's Date: \_\_\_\_\_ File Number: \_\_\_\_\_

Borrower: \_\_\_\_\_ Seller: \_\_\_\_\_

Property Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_

Legal Description: Lot \_\_\_\_\_ Block \_\_\_\_\_ Section \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Financial Information:**

Sales Price: \_\_\_\_\_

Sale / Refinance

Term Rate: \_\_\_\_\_

Loan amt.: \_\_\_\_\_

**Lender / Client Information:**

Lender / Client: \_\_\_\_\_

Attention: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

**Entry / Contact Information:**

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Existing / Proposed

If proposed, contact person for plans / specs: \_\_\_\_\_

Called in by: \_\_\_\_\_ Phone: \_\_\_\_\_

Fee Quote: \_\_\_\_\_ Due Date: \_\_\_\_\_ Fax: \_\_\_\_\_

**Bill To: (If different than lender / client:)** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Special Instructions:** \_\_\_\_\_

\_\_\_\_\_