



## **APPRAISAL FEE QUOTE & COMMENCEMENT AUTHORIZATION**

**Gillins Appraisal, Inc.**

*Evan R. Gillins, CRREA*

44421 10<sup>th</sup> Street West, Suite #E1

Lancaster, CA 93534

Phone: (661) 723-1000 Fax: (661) 723-1002

Email: [info@theVALUEpro.com](mailto:info@theVALUEpro.com)

**Client Name:** \_\_\_\_\_

**Client Address:** \_\_\_\_\_

**(City/State/Zip):** \_\_\_\_\_

**Ordered By:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Property Owner:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Subject Street Address/APN:** \_\_\_\_\_

**City & Zip Code:** \_\_\_\_\_

**Access to Property:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Property Type to be Appraised (Single Family Residence, Vacant Land, Multi-Residential, etc.)**

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**Purpose of Appraisal (Bankruptcy, Trust/Estate Planning, Divorce, etc.)** \_\_\_\_\_

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**Fee Quote (for the above described valuation) - \$** \_\_\_\_\_

**Estimated completion and delivery time-** \_\_\_\_\_

**This "Appraisal Fee Quote" is presented, and must be approved by the client, prior to the commencement of the valuation process. The agreed upon fee must be received by Gillins Appraisal, Inc. prior to delivery of the completed appraisal report.**

**Person authorizing request and payment** \_\_\_\_\_

Print Name & Title

Signature

Date

**Special Instructions/Comments for appraiser:** \_\_\_\_\_

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