



Flynn Mirtle Moran

FLYNN MIRTLE MORAN
APPRAISAL ORDER FORM
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Phone 374.7731
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INV. NO.: _____ Date Ordered: _____ Time: _____ Init: _____
FILE NO.: _____ Date Required: _____
SUBJECTS OFF: _____
APPOINTMENT: _____
Date: _____ For: _____ Re-Do: _____
Time: _____ Quote: _____

BANK/CLIENT
Name: _____ Attention: _____
Address: _____ Phone: _____
_____ Fax: _____
Bank Transit No.: _____ Cell No.: _____
_____ Email _____

PROPERTY
Owner: _____ Address: _____
Purchaser: _____ Location: _____
Roll No: _____ PID No: _____
Legal Description: Lot: _____ Blk: _____ Plan: _____ DL: _____
Sec: _____ Twp: _____ Rge: _____ MLS No.: _____

ACCESS INTO SUBJECT
Contact: _____ Cell No: _____ FEE: _____
Owner: _____ Home Ph: _____ DISBURSEMENTS: _____
_____ Work Ph: _____
Tenant: _____ Home Ph: _____ Phone/Fax _____
_____ Work Ph: _____ Courier _____
List/Sell Agent _____ Mileage _____
_____ Ph: _____ Photos _____
_____ Land Titles _____
_____ Misc. _____
Lock Box: _____ Offer Amount: _____ Plans & Specs _____
Accepted Offer Date: _____ Total: _____
INVOICE TOTAL: _____

SPECIAL INSTRUCTIONS
Reason for Appraisal: _____ Sale: _____ Refinance: _____ Inspection: _____
Access Calls: _____

