



**F.K. MITCHELL
APPRAISALS
INC.**

Windsor Branch 300 Eugenie St.E., Unit B Windsor ON, N8X 2Y1
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Leamington Branch 243 Erie St. S, Unit 4, Leamington ON, N8H 3C1
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BROKER INFO:

Broker Name: _____ Company: _____
Email: _____ Phone #: _____

ADDRESS

Subject Property to be appraised: _____
City: _____ Province: _____ Postal Code: _____
Purchaser's Name/Homeowner: _____

OPTIONS (Please choose ONE)

1) Purchase:

Purchase Price: \$ _____
How much financing is required? \$ _____ OR % _____ MLS#: _____
Condition to be waived by: _____ Closing date: _____

2) Financing:

Estimated Owner's Value: \$ _____
How much financing is required? \$ _____ OR % _____
Closing date: _____ Mortgage - 1st OR 2nd: _____

CONTACT

Contact Person for access to property: Name: _____
Email: _____ Home #: _____ Cell # _____

INSTRUCTIONS

Appraisal Type: Full Drive By Desktop Other: _____
Regular Urgent Report needed by (at the latest): _____

Comments: _____

PAYMENT & LENDER

Lender's Information: Lender's Name : _____ Contact: _____
Lender's Email : _____ Phone #: _____
Who is paying for the appraisal: Homeowner/purchaser Broker Other: _____