

# *Daniel Fries & Associates, Inc.*

Real Estate Appraisers & Consulting Services  
Corporate Square 349- B Dahlonga Street, Cumming, GA. 30040  
Phone 770-992-5593 Fax 866-333-5765 [www.danielfries.com](http://www.danielfries.com)

Appraisal Request Form Date\_\_\_\_\_

Client\_\_\_\_\_

Street\_\_\_\_\_ Suite #\_\_\_\_\_

City\_\_\_\_\_, State:\_\_\_\_\_, Zip\_\_\_\_\_

Phone #:\_\_\_\_\_, Fax\_\_\_\_\_

Email:\_\_\_\_\_

Customer/Owner/Buyer's name on appraisal:\_\_\_\_\_

Address of Property to be appraised: Street:\_\_\_\_\_

City\_\_\_\_\_, GA. Zip: \_\_\_\_\_

Legal: Lot\_\_\_\_\_, S/D\_\_\_\_\_, LL\_\_\_\_\_, Sect. \_\_\_\_\_ District\_\_\_\_\_

County\_\_\_\_\_ Comments\_\_\_\_\_

Type of Appraisal (check one)

Purchase\_\_\_\_\_, Refinance\_\_\_\_\_, ERC\_\_\_\_\_, Other\_\_\_\_\_

Sales price or estimated value range:\_\_\_\_\_

Access to property: Name\_\_\_\_\_

Phone #\_\_\_\_\_ and / or email\_\_\_\_\_

Please read and sign below: I agree to the fee quoted or as posted at  
[www.DanielFries.com](http://www.DanielFries.com) Payment will be made at the time of inspection. Payment is not  
contingent on a pre-determined estimate of value.

Signature:\_\_\_\_\_, Date\_\_\_\_\_

Fee Quoted:\_\_\_\_\_, Invoice per posted fee schedule\_\_\_\_\_