

HVCC Appraisal Ordering

Efficiency Simplified

APPRAISER APPLICATION

Date _____

Applicant Name (Last, First, MI.)	Social Security No.	Federal Tax ID#
Street Address	City, State, Zip	

Business Phone	Business Fax	Alternate Phone
License State & Number	Date of Expiration	Report Software Used
FHA Approved YES <input type="checkbox"/> NO <input type="checkbox"/>	Field Review Experience YES <input type="checkbox"/> NO <input type="checkbox"/>	E-Mail Address

Appraisal Course / Seminars completed in the past 3 years

_____	Date
_____	Date
_____	Date
_____	Date

Membership in Professional Appraisal Organization

_____	Date Joined
_____	Date Joined
_____	Date Joined

Required Documentation:

- Copy of Current License/Certifications
- Copy of E & O Insurance
- W-9 Form
- FHA Information
- Current Resume

COVERAGE AREA

County

State

Database/MLS Resource

Please List any Excluded Cities

It is the responsibility of the appraiser to be geographically competent and have access to data resources for verification purpose.

By signing below the vendor/appraiser certifies all appraisals completed for HVCC Appraisal Ordering will adhere to the requirements set forth above.

Signature

Date

Print Name

License #

State
