

INSURABLE VALUE ORDER FORM

FAX TO: (407)862-0122

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Altamonte Springs, Florida 32714
PHONE: (407)862-7070**

Email: DonO@floridarealtyanalysts.com

COMPANY/OWNER NAME: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE _____ **FAX:** _____

NUMBER: _____

EMAIL ADDRESS: _____

Contact Person: _____

PLEASE APPRAISE THE FOLLOWING PROPERTY:

Property Name (If Applicable) _____

Property Type (Condo, Apartments, etc...) _____

Property Address: _____

City: _____ State: FL ZIP: _____

Property Owner's Name (Name on Deed): _____

Contact for Entry: _____ Phone: _____

Number of Units (If Residential): _____ Square footage (If Office or Retail): _____

Year Built: _____ Number Buildings: _____

Date Requested: _____ Date Needed: _____

Are there Building	<u>(Circle One)</u>	Is there a Survey	<u>(Circle One)</u>
Plans Available?	Yes No	Available?	Yes No

Have there been any major Capital	<u>(Circle One)</u>
Improvements Recently?	Yes Yes

Other pertinent information necessary to the appraisal report:
