



CASCADE AUCTIONS

A DIVISION OF EHLI INDUSTRIAL, LLC

APPRAISAL ASSIGNMENT LETTER

Client Requesting Appraisal:	
Billing Address:	
Phone/Fax/email:	

Property to be Appraised:	
Physical Address:	
Contact Name:	
Phone:	
Email:	

Select the Purpose for or Intended use of the appraisal:

- | | | |
|--|---|---|
| <input type="checkbox"/> Liquidation | <input type="checkbox"/> Collateral Lending | <input type="checkbox"/> Equitable Distribution |
| <input type="checkbox"/> Bankruptcy | <input type="checkbox"/> Damage Claim | <input type="checkbox"/> Acquiring Insurance |
| <input type="checkbox"/> Casualty Loss | <input type="checkbox"/> Buying or Selling | <input type="checkbox"/> Internal Accounting |
| <input type="checkbox"/> Tax Liability | <input type="checkbox"/> Litigation | |
| <input type="checkbox"/> Other: _____ | | |

Select Appraisal Value (additional fee for MORE than one value):

- | | |
|--|---|
| <input type="checkbox"/> Auction | <input type="checkbox"/> In-place |
| <input type="checkbox"/> Fair Market | <input type="checkbox"/> New Replacement Cost |
| <input type="checkbox"/> Orderly Liquidation | |

Appraisal Fees:

\$135/hour (plus out-of-pocket-expenses which may include air travel, lodging, vehicle rental, meals, film developing, outside consulting, etc.) The minimum charge for any written report is \$250.

Two bound, color appraisal reports are included. Additional copies are \$35 each. **Additional copies:** I would like _____ additional color copies.

Third Party Authorization:

The Appraiser is authorized to provide _____ with a copy of this appraisal. *Appraisal fees are to be paid prior to the delivery of the reports unless otherwise agreed. All appraisals will conform to the Uniform Standards of Professional Appraisal practice as defined under Standards 7 and 8 USPAP2005.*

Appraiser Name:	Client Name:
Signature:	Signature:
Date:	Date: