



Email: CC@youramc.com

Appraisal Dispute Form

Submitter's Name/Email:	
Property Address:	
Invoice Number:	
Dispute Form Dated:	
Report type (i.e. 1004, 2055 Field Review)	
Client Name:	
Appraiser Name:	
Appraised Value:	
Describe the disputed issues with appraisal: (What is materially in error with the appraisal?)	<input type="checkbox"/> Distance of comparables <input type="checkbox"/> Square footage difference <input type="checkbox"/> Style of home <input type="checkbox"/> Age of comparables <input type="checkbox"/> Room Count <input type="checkbox"/> Other:

Alternative Comparables:

Comparables submitted must be superior to the comparables chosen by the appraiser. (More recent, more similar, more proximate, etc...) Alternative comps provided which are not more similar to the subject than those used by the appraiser will not be considered. Sales will not be considered if the data cannot be verified through a third party source.

	Subject	Alt comp #1	Alt comp #2	Alt comp #3
Address				
Date of sale				
Sale price				
Distance (miles)				
Square footage				
Style				
Age				
Bedrooms				
Baths				
Other:				

In order for us to reconsider the value of the original appraisal you will need to provide us with some added information and/or supporting documents. Fully fill out this form and e-mail it to: Reports@youramc.com