

# IVANHOE FINANCIAL, INC.

604 COURTLAND STREET, STE. # 320, ORLANDO, FL 32804

PHONE (407) 599-0900 FAX (407) 599-0888

## VA CASE NUMBER AND APPRAISAL REQUEST FORM

Date Requested \_\_\_\_\_

Correspondent \_\_\_\_\_

Correspondent Address \_\_\_\_\_

Correspondent VA ID # \_\_\_\_\_ Ivanhoe VA ID # 63626400001

Contact Name \_\_\_\_\_ Title \_\_\_\_\_

Contact Phone \_\_\_\_\_ Contact Fax \_\_\_\_\_

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Request Type ( ) LAPP – Lender Appraisal Processing Procedure      Purchase or Refinance (circle one)  
( ) Other - \_\_\_\_\_

PUD/Sub/Condo Name \_\_\_\_\_ ID# \_\_\_\_\_

Number of Living Units \_\_\_\_\_ County \_\_\_\_\_

Is Property \_\_\_\_\_ (E) Existing  
(P) Proposed - Enter Builder I.D. # \_\_\_\_\_  
(R) Refinance– Cash Out or Rollover \_\_\_\_\_

Short Legal \_\_\_\_\_  
(mandatory)

Property Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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S.S. No. \_\_\_\_\_

### VETERAN INFORMATION

Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_

Current Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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Seller Name \_\_\_\_\_

Does Seller Currently Occupy the Property ?    Y or N (circle one)