



133 E. BONITA AVE. #202
SAN DIMAS, CA 91773
MORTGAGE-MANAGED.COM
909.285.9511

APPRAISAL PAYMENT FORM

Purpose of Form: Form is required for payment of appraisal by borrower

Date: _____

Loan Number: _____

Borrower Name: _____

Co-borrower Name: _____

Property Address: _____

By signing this agreement, I, _____ (Card Holder) agree to pay MORTGAGE MANAGED or its assigned vendors/affiliates for the services rendered by the independent Appraiser in the amount of \$_____ in connection with the above stated loan number.

Signature of Name on Credit Card

Date

Contact Number (for inspection) _____
Credit Card Number _____
Exp Date

Email Address _____
Name on Credit Card _____
CVV Code

Billing Address