APPRAISAL ORDER FORM
NON-REFUNDABLE DISCLOSURE

By submitting this document, you are authorizing us to order the appraisal report for you. We require the appraisal fee (\$525.00) upfront to place the appraisal order. If the appraiser should notify us that the appraisal fee should be more for any reason, we will contact you prior to ordering the appraisal to adjust the fee, should it be less, it will be corrected at closing on your closing disclosure. Any difference in the appraised value could affect your qualification, rate, closing cost, etc. If you have any questions regarding the way the appraised value impacts your qualification, please relay your concerns to your loan officer or processor.

If for any reason, you do not want the appraisal prior to specific time/date or milestone (home inspection, etc.) please make sure to notate this below.

Please indicate your non-refundable preferred payment method below:
___Charge to debit card / credit card:
__ VISA __ MasterCard __ Discover __ American Express
Name on credit/debit card: _____
Card number: _____
Expiration date: _____
CVV2: _____

Billing address: _____
Phone number: _____
E-mail address: _____

___ Charge my GCEFCU account.
___ Email the details my loan officer/processor
___ Send check to Gulf Coast Educators Federal Credit Union

I authorize Gulf Coast Educators Federal Credit Union or their preferred appraisal vendor to debit the financial institution account or credit card indicated on this form, for the noted amount on today's date. I understand that because this is an electronic transaction these funds may be withdrawn from my account as soon as the above noted transaction date. I certify that I am an authorized user of this credit card or financial institution account, and that I will not dispute the payment with my Credit Card Company or financial institution, so long as the transaction corresponds to the terms indicated in this form.

I/WE ACKNOWLEDGE THAT THIS APPRAISAL FEE IS NON-REFUNDABLE
Please note that the signature below must match the name on the credit card or checking account information provided

X _____   Date: _____

X _____   Date: _____