

COLLISION REPAIR ESTIMATE - ORDER FORM

| TODAYS DATE | VEHICLE OWNER | | VEHICLE | VEHICLE LOCATION (ZIP) | |
|-------------------------------|---------------|-----------------|------------------|------------------------|------------------|
| | | | | | |
| | | SUBJECT VEHICLE | DETAILS | | |
| DATE OF ACCIDENT | | | | | |
| VIN NUMBER | | | | | |
| ODOMETER READING | | | | | |
| ODOMETER TYPE | Actual | Unreadable | Unknown | | |
| DAMAGE AREAS | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| PICTURES NEEDED | | | | | |
| | | | | | |
| | | | WIDE SHOT - LEFT | FRONT | |
| | | | WIDE 31.13.1 | | |
| | | | | | |
| DAMAGED AREAS MULTIPLE ANGLES | VIN STICKER | ODOMETER | WIDE SHOT -RIGHT | REAR | OTHER - Optional |
| UNRELATED DAMAGE | | | | | |
| | | | | | |
| | | | | | |

https://appraisalengine.com Tel: 877-667-2326 CAR APPRAISALS AND CLAIMS

NOTES AND RELEVANT INFO

PAYMENT AND SUBMISSION INFORMATION

SEND FORM AND PAYMENT VOUCHER BY US MAIL

1372 Peachtree St NE

Ste S10

Atlanta, GA 30309

Please allow 5 business days for processing

SEND FORM VIA EMAIL

crm@appraisalengine.com

Please allow 2 business days for processing

ONLINE PAYMENT PREFERRED

Online Payment Page

Pay by Phone

1-877-667-2326

https://appraisalengine.com Tel: 877-667-2326 CAR APPRAISALS AND CLAIMS



Payment Voucher

Option 1: One Time Credit Card Payment Authorization Form.

Sign and complete this form to authorize Appraisal Engine Inc to make a one time debit to your credit card listed below.

By signing this form you give us permission to debit your account for the amount indicated on or after the indicated date. This is permission for a single transaction only, and does not provide authorization for any additional unrelated debits or credits to your account.

| Please complete the information below: | | | | |
|---|--|--|--|--|
| I(Full Name) | authorize Appraisal Engine Inc. to charge the payment method | | | |
| listed below the amount of \$275 . | | | | |
| Product: Collision Repair Estimate. | | | | |
| | | | | |
| Billing Address | Phone# | | | |
| City, State, Zip | Email | | | |
| | | | | |
| Account Type: | MasterCard | | | |
| Cardholder Name | | | | |
| Account Number | | | | |
| Expiration Date | | | | |
| CVV2 (3 digit number on back of Visa/MC, 4 digits on front of AMEX) | | | | |
| | | | | |

I authorize the above named business to charge the credit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the goods/services described above, for the amount indicated above only, and is valid for one time use only. I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; I also understand that there are no refunds or exchanges. I understand that I may not agree with Appraisal Engine's results or findings as they are independent.



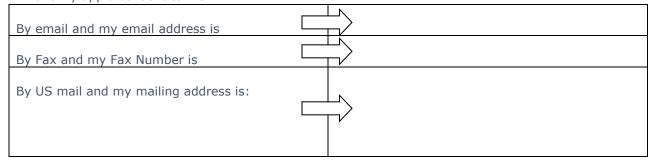
Option 2: Mail a check to us.



Dear Appraisal Engine Inc:

Enclosed is a check for \$275 as payment for the appraisal on my vehicle.

I want my appraisal sent to me:



Please mail this forms to:

Appraisal Engine Inc

1372 Peachtree St NE

Ste S10

Atlanta, GA 30309

Please allow 7 days for processing.