



Request for Reconsideration Dispute Resolution Form

All requests for reconsideration must be based on errors in factual information to comply with state and federal regulations. The request must be made in writing.

Please complete the information below and either e-mail the form to 411@vmgappraisals.com **OR** your VMG Reviewer.

Dispute General Information:

Borrower Name: _____
Please provide full name

Property Address: _____
Street

_____ *City*

_____ *State* _____ *Zip Code* _____ *County*

Appraiser Name: _____

File Number: _____

Factual Errors/Dispute Information:

1. _____
2. _____
3. _____
4. _____
5. _____

Consideration of Additional Sales Comparables:

(PLEASE NOTE: The sales must be closed within six months. They should be closer in proximity than sales used by the appraiser in the report.)

<i>Address</i>	<i>Date Closed</i>	<i>Sale Amount</i>

Requestor Information:

Requested By: _____

Company Name: _____

Telephone Number: _____

E-mail Address: _____

Date: _____