

MEMORANDUM FOR APPRAISAL

This memorandum by and between _____
_____ of the first part, and the insurance
company, or companies, whose names are signed hereto, each for itself and not jointly, of the second part:

WITNESS: that whereas the party of the first part claims to have sustained a loss by _____
occurring on the _____ day of _____, 20_____ to and upon the following
described property, to wit: _____

WHEREAS, a disagreement has arisen between the parties hereto, as to the actual cash value and the amount of such loss, and whereas, the policy (or policies) of said party (or parties) of the second part, held by said party of the first part provides that:

Appraisal: If you and we fail to agree on the actual cash value, amount of loss, or cost of repair or replacement, either can make a written demand for appraisal. Each will then select a competent, independent appraiser and notify the other of the appraiser's identity within 20 days of receipt of the written demand. The two appraisers will choose an umpire. If they cannot agree upon an umpire within 15 days, you or we may request that the choice be made by a judge of a district court of a judicial district where the loss occurred. The two appraisers will then set the amount of loss, stating separately the actual cash value and loss to each item.

If the appraisers fail to agree, they will submit their differences to the umpire. An itemized decision agreed to by any two of these three and filed with us will set the amount of the loss. Such award shall be binding on you and us. Each party will pay its own appraiser and bear the other expenses of the appraisal and umpire equally.

Therefore, this memorandum witness: that in conformity to the terms and conditions of the policy (or policies) of the party (or parties) of the second part _____
_____ and _____

have been selected and are hereby appointed appraisers, to appraise in accordance with the terms and conditions of said policy (or policies), the actual cash value of said property and the amount of loss directly caused by said _____
_____ to and upon the same.

It is further mutually agreed that such appraisal does not in any respect waive any of the provisions or conditions of said policy (or policies) of insurance or any forfeiture thereof or the proof of such loss required by the policy (or policies) of insurance thereon.

DECLARATION OF APPRAISERS

We, the undersigned, do solemnly swear that we will act with strict impartiality in making an appraisal of the actual cash value and the amount of loss upon the property hereinbefore mentioned, in accordance with the foregoing appointment, and that we will make a true, just and conscientious award of the same, according to the best of our knowledge, skill and judgment. We are not related to the insured, either as creditors or otherwise, and are not interested in said property or the insurance thereon.

Signature of Appraiser

Date

SELECTION OF UMPIRE

We, the undersigned, hereby select and appoint _____
to act as Umpire to settle matters of difference that shall exist between us, if any, by reason of and in compliance
with the foregoing memorandum and appointment.

QUALIFICATION OF UMPIRE

I, the undersigned, hereby accept the appointment of Umpire, as provided in the foregoing agreement, and
solemnly swear that I will act with strict impartiality in all matters of difference that shall be submitted to me in
connection with this appointment, and I will make a true, just and conscientious award, according to the best of my
knowledge, skill and judgment. I am not related to any of the parties to this memorandum nor interested as a
creditor or otherwise in said property or insurance.

Umpire's Signature

Date

AWARD

We, the undersigned, pursuant to the within appointment, do hereby certify that we have truly and
conscientiously performed the duties assigned to us, agreeably to the foregoing stipulations, and have appraised and
determined and do hereby award as the actual cash value of said property on the _____ day of
_____, 20 _____ and the amount of loss thereto by _____ on that day,
the following sums, to wit:

ACTUAL CASH VALUE AMOUNT OF LOSS

1 ST ITEM _____	ACV: \$ _____	Total Loss: \$ _____
2 ND ITEM _____	ACV: \$ _____	Total Loss: \$ _____
3 RD ITEM _____	ACV: \$ _____	Total Loss: \$ _____
4 TH ITEM _____	ACV: \$ _____	Total Loss: \$ _____
5 TH ITEM _____	ACV: \$ _____	Total Loss: \$ _____
6 TH ITEM _____	ACV: \$ _____	Total Loss: \$ _____

Umpire's Signature

Date

Appraiser's Signature

Date

NOTARY: State of _____; County of _____; SS

On this _____ day of _____, 20 _____.

Notary Signature

Date Commission Expires