



303 East 81st Street, New York, NY 10028

APPRAISAL CLIENT INTAKE FORM

PURPOSE

Donation

Donor: _____
Donor's address: _____
Donee: _____
Donee's address: _____
Date of Gift of Deed: _____
Origin of artwork: _____
Provenance information: _____

Estate

Name of decedent: _____
Date of death: _____
Relationship to client: _____
Executor: _____
Estate attorney: _____
Origin of artwork: _____
Provenance information: _____
Address of location of artwork: _____

Equitable Distribution

Date of divorce filing: _____
Liquidation (y/n): _____
Collateral (y/n): _____
POV (y/n): _____

Insurance

Damage or Loss: _____
Date & type of incident: _____
Owner of property: _____
Location (address) of property: _____
Insurance Agent: _____
Insurance Agent's contact info: _____

Estimated Fees:

Hourly fee: _____
Flat fee: _____
Travel time/costs: _____
Consultant's fees: _____

Estimated hours: _____

Estimated TOTAL: \$ _____