

REQUEST FOR VALUATION SHARED EQUITY SCHEME POST SETTLEMENT

For: HOUSING ACT, Capital Program Team

Requesting Officer:

Tel No: (02) 620

Fax No: (02) 62071403

Email:@act.gov.au **TO: Valuation Firm Details**

NAME OF FIRM

PHONE: FAX:

1. Location Details

DIVISION: SECTION BLOCK

ADDRESS

2. Property Access

NAME OF TENANT

PHONE HOME: WORK: MOBILE:

3. Property Details

RECORDED UVR DATE ACQUIRED

NUMBER OF BEDROOMS

BLOCK SIZE: HOUSE SIZE:

4. Additional Information

Sales Officer's Signature:

Date:

