

**APPRAISAL REVIEW – SURPLUS PARCEL**

RE1009 04/2015

Wisconsin Department of Transportation

FOR REGIONAL/CENTRAL OFFICE APPROVAL:

REGION:

Property owner: WisDOT	Appraiser:
Date sent by region:	Date received by reviewer:
Date corrections requested:	Date corrections received:

FAIR MARKET VALUE OF SURPLUS PROPERTY by Appraiser ..... \$

FAIR MARKET VALUE OF SURPLUS PROPERTY approved by Reviewer ..... \$

I certify that, to the best of my knowledge and belief:

- The facts reported by me and used in the review process are true and correct.
- The analyses, opinions, and conclusions in this review report are limited only by the assumptions and limiting conditions stated in this review report, and are my personal, unbiased professional analyses, opinions and conclusions.
- I have no direct or indirect present or prospective interest in the property which is the subject of this report, and that I have no personal interest or bias with respect to the parties involved.
- My compensation is not contingent on an action or event resulting from the analyses, opinions, or conclusions in, or the use of, this review report.
- My analyses, opinions, and conclusions were developed and this review report was prepared in conformity with the Uniform Standards of Professional Appraisal Practice.
- My determination of fair market value has been reached independently based on appraisals and other factual data of record without collaboration or direction.

Reviewer's Signature

Date

Print Name

CGA #

Appraisal Format:

- Standard Format Before & After
- Standard Format Surplus Parcel
- Abbreviated Standard
- Short Format Summary
- Letter of Opinion

**REVIEW CHECKLIST**

	YES	NO
1. DATE OF OPINION SAME AS DATE OF LATEST INSPECTION .....	<input type="checkbox"/>	<input type="checkbox"/>
2. ADEQUATE PARCEL AND NEIGHBORHOOD DISCUSSION .....	<input type="checkbox"/>	<input type="checkbox"/>
3. ADEQUATE DISCUSSION OF LAND .....	<input type="checkbox"/>	<input type="checkbox"/>
4. ADEQUATE DISCUSSION OF IMPROVEMENTS AND UTILITIES (if any) .....	<input type="checkbox"/>	<input type="checkbox"/>
5. DISCUSSION OF HIGHEST AND BEST USE .....	<input type="checkbox"/>	<input type="checkbox"/>
6. DISCUSSION OF ZONING AND ITS BEARING ON THE SUBJECT .....	<input type="checkbox"/>	<input type="checkbox"/>
7. THOROUGH ANALYSIS OF SUBJECT .....	<input type="checkbox"/>	<input type="checkbox"/>
8. DESCRIPTION OF APPROACHES TO VALUE/RECONCILIATION .....	<input type="checkbox"/>	<input type="checkbox"/>
9. VERIFICATION OF SALES OF A SUFFICIENT NUMBER AND QUALITY .....	<input type="checkbox"/>	<input type="checkbox"/>
10. CLEAR AND ACCURATE SALES MAP INCLUDED .....	<input type="checkbox"/>	<input type="checkbox"/>
11. OVERALL CONCLUSION OF VALUE USES SOUND LOGIC .....	<input type="checkbox"/>	<input type="checkbox"/>

COMMENTS:

Project ID	Highway	County	Parcel No.
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