

SHORT FORM APPRAISAL REPORT

North Dakota Department of Transportation
Environmental & Transportation Services
(Rev. 12-2015)

Page 1 of 2

| | |
|-------------------------------------|------------------------|
| Project Control Number: | County: |
| Project Number: | Parcel(s): |
| Effective Date of Valuation: | Date of Report: |

| |
|---|
| Property Location/Legal Description: |
|---|

| | | | |
|-------------------------|--------------|---------------|------------------|
| Landowner(s): | | | |
| Mailing Address: | City: | State: | ZIP Code: |

| | | | |
|--|----------------|----------------|--|
| Appraiser's Narrative: | | | |
| Present Use: | | Zoning: | |
| Highest and Best Use | Before: | After: | |
| Hypothetical Conditions or Extraordinary Assumptions: | | | |

| | |
|--|--------------|
| The purpose of this appraisal is to estimate the Market Value (as defined by OTS Title 12 CFR, Part 564.2) of fee simple rights for property or rights therein to be acquired under the provisions of North Dakota Statutes. | |
| The undersigned appraiser hereby certifies that the property was personally inspected on | Date: |
| I afforded the owner or representative the right to accompany me on the inspection of the property. This offer was: accepted <input type="checkbox"/> declined <input type="checkbox"/> | |

| Opinion of Value - Parcel Payment Breakdown | | | | | | |
|---|------------------|--------------------------|---------------------|--------------------------|------------------------|--------------------|
| Parcel # | Acquisition Type | Parcel Size (Acres/SqFt) | Value Per Acre/SqFt | Parcel Acquisition Value | Minimum Payment Yes/No | Total Compensation |
| | | | | | | |
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| | | | | | | |
| | | | | | | |
| Total | - | - | - | - | - | |

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Page 2 of 2

Appraiser's Narrative:

| | | |
|---------------------------|--------|-------------------------------|
| Appraiser (Type or Print) | Agency | Total Amount of Compensation: |
| Signature | | Date |

Review Appraiser's Narrative:

| | |
|--|----------------------------------|
| NDDOT Review Appraiser (Type or Print) | Approved Amount of Compensation: |
| Signature | Date |