

Response to Request for Proposals

Consultant Information Form (CIF)

Name of Company: _____
(Legal name of company/business/entity as shown on W-9)

Mailing Address of Company: _____

Physical Address of Company: _____

Telephone Number: _____ Fax Number: _____

Tax ID#: _____ Alabama Buys Vendor Codes (s): _____
(N/A if not currently registered)

Authorized Official for Contract Execution:

Name: _____

Title: _____

List of Qualified MAI Appraiser (s) authorized to submit quotes on behalf of Company:

Name of Appraiser: _____
(Print name and include all applicable designations: MAI, SRPA, AI-GRS, etc.)

Alabama License Number: _____

Currently certified to perform UASFLA (Yellow Book) appraisals: Yes / No (circle one)

Phone: _____ Email: _____

Physical Office Location: _____

[SIGNATURE ON FOLLOWING PAGE]

Name of Appraiser: _____
(Print name and include all applicable designations: MAI, SRPA, AI-GRS, etc.)

Alabama License Number: _____

Currently certified to perform UASFLA (Yellow Book) appraisals: Yes / No (circle one)

Phone: _____ Email: _____

Physical Office Location: _____

Name of Appraiser: _____
(Print name and include all applicable designations: MAI, SRPA, AI-GRS, etc.)

Alabama License Number: _____

Currently certified to perform UASFLA (Yellow Book) appraisals: Yes / No (circle one)

Phone: _____ Email: _____

Physical Office Location: _____

Name of Appraiser: _____
(Print name and include all applicable designations: MAI, SRPA, AI-GRS, etc.)

Alabama License Number: _____

Currently certified to perform UASFLA (Yellow Book) appraisals: Yes / No (circle one)

Phone: _____ Email: _____

Physical Office Location: _____

Authorized Company Official Certifying and Submitting CIF:

Name: _____

Title: _____

Signature: _____

Date: _____