



Appraisal of Non-Cash Donations to NBCC

Appraiser

Name (individual or company): _____

Address: _____ City: _____

Province: _____ Postal Code: _____

Telephone: _____ Email: _____

Equipment Details

Donated Item: _____

Include Serial Numbers : _____

Condition: Excellent Good Fair Poor

(Provide a photo of the equipment where possible)

Estimated Appraised Value of equipment based on Fair Market Value and condition at time of donation.

\$ _____

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

- The statements of fact contained in this appraisal are true and correct.
- I have made a personal inspection of the property subject to this report.
- I have the necessary background required to make a fair and accurate assessment of the property being appraised.

Appraiser Signature: _____ Date: _____