APPRAISEITNOW

Choosing an Appraiser for a Vehicle or Personal Property Insurance Claim, Including a Disputed Total-Loss Offer: A 2026 Handbook

AppraiseItNow Inc.

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Educational material, not an appraisal.

Who needs a claim appraiser for a vehicle or personal property loss

This handbook, published by AppraiseItNow Inc. in 2026, is written for people who have suffered a loss to movable property and need an independent opinion of its value to support an insurance claim. It focuses on choosing an appraiser and on what that appraiser should deliver. It does not explain how to schedule coverage in detail, and it does not cover real estate.

Readers this handbook serves

- **Vehicle owners facing a total-loss offer.** An insurer has declared a car, truck, motorcycle or other motorized vehicle a total loss and offered a settlement figure that the owner believes is too low. The owner wants a documented second opinion.
- **Boat owners after a sinking, fire, theft or storm.** Marine losses often involve equipment, electronics and engines whose value is not obvious from a list price.
- **Owners of machinery and equipment.** A contractor, farmer or small manufacturer has lost a machine and needs its pre-loss value established.
- **Collectors and households.** A fire, flood, burglary or other event has damaged or destroyed fine art, furniture, jewelry, electronics or general contents.
- **Advisers to policyholders.** Attorneys, public adjusters, accountants and family members who help a claimant organize documents and decide whom to hire.

What the reader is trying to decide

A claimant choosing an appraiser is really making three decisions. The first is whether the appraiser has the right expertise for the specific asset. The second is whether the appraiser will value the property under the correct standard and as of the correct date. The third is whether the finished report will be clear, supportable and usable in the conversation with the insurer. The sections below are organized around those decisions.

Terms used throughout

- **Claim appraisal.** A written opinion of the value of property that was lost, stolen, damaged or destroyed, prepared to support or test an insurance settlement.
- **Coverage appraisal.** A written opinion of value prepared before any loss, usually to schedule an item on a policy or to set a limit.
- **Total loss.** A carrier's determination that a vehicle or other item will be paid out rather than repaired. What a claim pays depends on the policy and state law.
- **Valuation report.** The document an insurer produces to support its offer. For vehicles it typically lists comparable vehicles, adjustments for mileage, options and condition, and a

resulting figure.

- **Value standard.** The definition of value the appraisal applies, such as replacement cost, actual cash value or fair market value.
- **Effective date.** The date to which the value opinion applies.
- **Scope of work.** The type and extent of research and analysis an appraiser performs, including how much inspection is done.

What a claim appraisal of a vehicle or personal property actually does

A claim appraisal answers a narrow question: what was this property worth, under the value standard that applies, on the date of the loss? Everything else in the report exists to make that answer credible and traceable.

The value standard depends on the policy, not the appraiser

Policyholders often assume that "value" has one meaning. It does not. Whether a claim pays replacement cost or actual cash value depends on the policy and state law. California, for example, defines actual cash value as the cost to repair or replace less a fair deduction for depreciation, up to the policy limit (Cal. Ins. Code § 2051(b)).

The practical consequence is that the claimant should locate the policy's valuation language before hiring anyone. The declarations page, the loss settlement section and any endorsements or schedules are the usual places to look. A competent appraiser will ask which standard applies; a claimant who already knows the answer saves a round of correspondence and reduces the risk that the report addresses the wrong question.

Claim appraisals compared with coverage appraisals

The two assignments share techniques but differ in purpose, date and inputs. The table below shows the distinctions.

Feature	Claim appraisal	Coverage appraisal
Purpose	Support or test a settlement after a loss	Schedule or insure property before a loss
Effective date used by AppraiseItNow	The date of loss	The report date
Value standard	Depends on the policy and state law	Replacement cost for most items; fair market value or actual cash value for vehicles
What AppraiseItNow requires	The carrier and the date of loss	The value standard and any format the insurer requires

For an insurance coverage appraisal, AppraiseItNow needs the value standard (replacement cost for most items; fair market value or actual cash value for vehicles) and any format the insurer requires. That fact matters to claimants for one reason: a coverage appraisal prepared years earlier is evidence of what the owner had, but it was dated and defined for a different purpose. A new claim appraisal fixes the value as of the date of loss.

Why the effective date matters so much in a claim

An appraisal's effective date is the date the value applies to. It can be current, past (a date of death or donation) or future, and the report states both the effective date and the report date (USPAP, 2024 edition). In a claim, the effective date is almost always in the past, sometimes by weeks or months. Market conditions for used vehicles, equipment and art can move noticeably over that span. A report that quietly uses today's market for a loss that happened earlier is answering the wrong question, and an insurer's reviewer will notice.

Inspection is a scope decision, not a fixed rule

Many claimants assume a credible appraisal requires an appraiser to see the property in person. USPAP does not require an in-person inspection in every assignment. The appraiser decides the scope of work, including how much inspection credible results need, and the report describes that scope (USPAP, 2024 edition). In a total-loss or destruction claim, the property may no longer exist in usable form, may be at a salvage yard, or may have been stolen. The appraiser then relies on photographs taken before the loss, records, receipts, title documents, maintenance history and the insurer's own file.

When facts about the lost property are uncertain

A destroyed or stolen item often leaves gaps: its exact condition, a specific option package, whether a repair was completed. An appraiser may assume an uncertain fact is true (an extraordinary assumption) only when it's needed for credible results, there's a reasonable basis for it and the analysis stays credible, and the report must say so clearly (USPAP, 2024 edition).

For the claimant, this means two things. First, documents that remove uncertainty are valuable, because every fact that is proven no longer has to be assumed. Second, a report that relies on an assumption should disclose it plainly. A hidden assumption weakens a report; a disclosed and reasoned one is part of a transparent analysis.

Criteria for judging an appraiser in a total-loss or property claim dispute

The criteria below are ordered roughly by how often they decide whether a claim report is useful. None of them depends on the appraiser's location; all of them depend on the appraiser's method and expertise.

Criterion 1: Expertise in the specific asset class

A vehicle appraiser and a fine art appraiser use different markets, data sources and condition vocabularies. A claimant should look for an appraiser whose regular work includes the type of property lost: late-model passenger vehicles, classic or modified vehicles, commercial trucks, boats and engines, construction or agricultural equipment, paintings and works on paper, or household contents. Asset-class depth matters more than proximity, because most claim work rests on documents and market data rather than on a site visit.

Criterion 2: Command of the correct value standard

The appraiser should ask which value standard the policy uses, or should be able to explain how the report will handle the question if the claimant cannot yet answer it. An appraiser who offers a single "market value" figure without asking about the policy is a warning sign. The claimant should also confirm that the appraiser will not substitute a different standard, such as an insurance replacement figure, when the policy calls for actual cash value, or the reverse.

Criterion 3: Willingness to value as of the date of loss

The appraiser should state the effective date in the engagement and in the report, and the market evidence should be drawn from a period appropriate to that date. For vehicles, this usually means sales or listings from around the time of loss, not from the date the report is written.

Criterion 4: Ability to engage with the insurer's valuation report

In a disputed total-loss offer, the most useful appraisal is one that addresses the insurer's analysis directly. The appraiser should be able to read a carrier's valuation report and identify where it may diverge from the evidence. Common points of divergence include:

- **Comparable selection.** Whether the comparables match the lost vehicle's year, make, model, trim, drivetrain, engine and body style.

- **Geography.** Whether comparables come from a market a buyer in the owner's area would realistically use.
- **Mileage adjustments.** Whether the size and direction of the adjustment are reasonable for the vehicle type.
- **Options and packages.** Whether factory packages, aftermarket equipment and recent major components were recognized.
- **Condition rating.** Whether the condition assigned matches the vehicle's documented pre-loss state.
- **Listings versus sales.** Whether asking prices were treated as sale prices without comment.

An appraiser who can explain these points in plain language, and support each with evidence, gives the claimant something concrete to discuss with the adjuster.

Criterion 5: Compliance with USPAP

USPAP is the Uniform Standards of Professional Appraisal Practice (USPAP, 2024 edition). A claimant should ask whether the report will be prepared in accordance with USPAP and should expect the report to describe its scope of work, its effective date and any extraordinary assumptions. Compliance does not guarantee that an insurer will agree with a value, but it gives the insurer's reviewers a recognized framework against which to read the report.

Criterion 6: Independence and a defined role

The claimant is hiring an appraiser to give an honest opinion of value, not an advocate to reach a target number. An appraiser who promises a particular result before reviewing the evidence is offering something an insurer will discount. A useful question is whether the appraiser will report the figure the evidence supports even if it is close to, or below, the carrier's offer. The answer should be yes.

Criterion 7: Credentials relevant to the asset

Professional designations show that an appraiser has completed coursework, examinations or peer review in a discipline. A claimant should ask which designations the appraiser holds and how they relate to the property in question. A designation focused on business valuation, for example, says less about a boat than one focused on personal property or machinery. Designations are one input; demonstrated asset-class experience is another.

Criterion 8: Clarity about what the claimant must supply

A good appraiser explains, before work begins, which documents and photographs are needed and which are optional. Vague requests lead to delays and to reports built on assumptions that could have been avoided. The claimant should expect a specific list tailored to the asset and the purpose.

Criterion 9: A transparent fee arrangement

Whatever the fee, the claimant should know before work begins how it is set and what it covers. Questions worth settling in advance include whether the fee is fixed or time-based, whether a written report is included, and whether follow-up questions from the insurer are part of the engagement or billed separately.

Criterion 10: Report readability

Adjusters, reviewers and sometimes attorneys will read the report. It should identify the property precisely, state the value standard and effective date, describe the scope of work, present the evidence, show the reasoning from evidence to conclusion, and disclose any assumptions. A claimant can ask to see a redacted sample report to judge readability before engaging an appraiser.

A scoring aid

Some claimants find it useful to rate each candidate appraiser against the criteria in a simple grid.

Criterion	What a strong answer looks like
Asset-class expertise	Regular work on the same type of property
Value standard	Asks about the policy before quoting a figure
Effective date	Commits to the date of loss in writing
Engagement with insurer report	Explains specific points of possible divergence
USPAP	Confirms compliance and describes the report's contents
Independence	Will report what the evidence supports
Credentials	Designations relevant to the asset
Document requests	Specific list, tailored to the asset
Fee clarity	Basis and inclusions stated before work begins
Readability	Sample report is clear and traceable

Questions a policyholder should put to a prospective claim appraiser

The questions below turn the criteria into a conversation. Each is followed by a short note on what the answer reveals.

Questions about expertise and fit

1. **How often does the appraiser value property of this specific type for insurance claims?** The answer shows whether the appraiser knows the relevant market and data sources.
2. **Has the appraiser reviewed insurer valuation reports for this kind of asset before?** Familiarity with the structure of these reports shortens the analysis and sharpens the critique.
3. **Who will actually prepare and sign the report?** The claimant should know whether the person in the conversation is the person doing the work, and what that person's background is.
4. **Which professional designations does the signing appraiser hold?** The follow-up question is how those designations relate to this asset.

Questions about standard, date and scope

5. **Which value standard will the report use, and how will the appraiser confirm it?** The claimant should be ready to share the policy's loss settlement language.
6. **What effective date will the report use?** In a claim, the expected answer is the date of loss.
7. **Will the appraisal be done from photographs and documents, in person, or both, and why?** The answer should be tied to what credible results require for this property.
8. **If some facts about the lost property cannot be confirmed, how will the report handle them?** The answer should reflect clear disclosure of any extraordinary assumption.
9. **Will the report be prepared in accordance with USPAP?** The answer should be a direct yes or no.

Questions about the insurer's position

10. **Will the appraiser review the insurer's valuation report and offer?** For a disputed total loss, this review is the core of the assignment.
11. **Will the report address the insurer's comparables and adjustments specifically, or present an independent analysis only?** Both approaches can be valid; the claimant should know which to expect.
12. **If the evidence supports a value close to the insurer's offer, will the report say so?** This confirms independence.

Questions about documents and logistics

13. **What does the appraiser require, and what is merely helpful?** A clear split between the two saves time.

14. **What photographs are needed for this asset type?** The answer should be specific: which views, which identifiers, which readings.
15. **How will requests for missing information be handled during the assignment?** The claimant should know whom to contact and how follow-up works.

Questions about the finished product

16. **What will the report contain?** The claimant should hear a description of identification, standard, date, scope, evidence, reasoning and assumptions.
17. **How is the fee set, and what does it include?** The answer should be settled before work begins.
18. **Can the appraiser provide a redacted sample report?** A sample reveals more about clarity than any description.

What a complete claim appraisal engagement contains

A complete engagement runs from intake through delivery and includes everything the claimant needs to put the report in front of an insurer. The stages below describe what a claimant should expect from a competent appraiser and what the claimant should prepare.

Stage 1: Defining the assignment

The engagement begins by fixing the purpose (an insurance claim), the client, the property, the value standard and the effective date. These elements should appear in writing before analysis starts. If the value standard is unknown, the engagement should say how it will be confirmed.

Stage 2: Gathering documents

The claimant's document file is a major factor in how quickly and how firmly the appraisal can be completed. A practical checklist follows.

For every claim

- The name of the insurance carrier
- The date of loss
- The claim number, if one has been issued
- The insurer's valuation report and written offer, if any
- The policy declarations page and loss settlement language

For vehicles

- Title or registration showing the VIN
- The mileage at or near the date of loss

- The window sticker or build sheet, if available
- Receipts for aftermarket equipment, major repairs and recent tires, brakes or other components
- Maintenance records
- Photographs of the outside and inside taken before the loss

For boats

- Title or registration and the HIN
- Engine hours
- Survey reports, if any
- Receipts for electronics, canvas and engine work
- Pre-loss photographs of the outside, helm, engine and inside

For machinery and equipment

- Make, model and serial number
- Hours and whether the machine ran before the loss
- Attachments and their documentation
- Service and repair records

For fine art

- Artist, title, medium, dimensions and date, if known
- Bills of sale, certificates or prior appraisals
- Pre-loss photographs of the front, back, signature and frame

For household contents

- An item list grouped by room or category
- Receipts, credit card statements or order confirmations
- Pre-loss photographs, including general room photographs that show items in place

Stage 3: Analysis

The appraiser researches the relevant market as of the effective date, selects and adjusts comparable evidence, and reconciles the evidence into a conclusion. In a disputed total-loss assignment, the analysis also tests the insurer's valuation report item by item.

Stage 4: Follow-up and clarification

Missing details are common and should be expected. A complete engagement includes a clear process for requesting and receiving them without restarting the assignment.

Stage 5: The written report

A claim report is easier for an insurer to use when it contains the following, which are practical expectations rather than a formal checklist:

- A precise description of the property, with identifiers such as a VIN, HIN or serial number
- The value standard and its source
- The effective date and the report date
- The scope of work, including whether and how the property was inspected
- The market evidence and the adjustments made to it
- The reasoning from evidence to conclusion
- Any extraordinary assumptions, clearly identified

Worked example 1 (hypothetical): a disputed total-loss offer on a sedan

A policyholder's four-year-old sedan is declared a total loss after a collision. The insurer's valuation report lists five comparables and arrives at an offer of $21,400. The policyholder believes the figure is low.

Before engaging an appraiser, the policyholder gathers the title, a mileage reading taken at the tow yard, the window sticker, receipts for a set of tires installed four months earlier, and phone photographs of the car's exterior and interior taken the previous summer. The policyholder also collects the insurer's report, the written offer and the claim number.

An appraiser reviewing the file notes several points to investigate:

- Two of the insurer's comparables are a lower trim level without the technology package shown on the window sticker.
- One comparable is located in a distant region, while closer listings of the same trim existed around the date of loss.
- The insurer rated the interior condition below average, but the policyholder's photographs show little visible wear.
- The mileage adjustment appears to treat the vehicle's mileage as higher than the tow-yard reading.

The appraiser's report would present its own comparables and adjustments as of the date of loss and explain each point of divergence from the insurer's analysis. Whether the resulting figure is higher, lower or similar to the offer depends on the evidence. The handbook draws no conclusion about what the insurer should pay; that outcome depends on the policy, the evidence and the parties' discussion.

Worked example 2 (hypothetical): household contents after a kitchen fire

A household loses a dining set, a hutch, small appliances and a framed print in a kitchen fire. The policy's loss settlement language is unclear to the homeowner, who asks the agent for the relevant pages.

The homeowner builds a list by room, pulls order confirmations from email, locates a credit card statement for the hutch, and finds holiday photographs that show the dining set and print in place. For the print, the homeowner has a photograph of the front but none of the back or signature.

An appraiser working this file would value each item or group under the confirmed value standard as of the date of loss. If the print's edition or signature cannot be confirmed, the appraiser decides whether an extraordinary assumption is warranted and, if one is used, discloses it in the report. The homeowner's job is to supply everything that might reduce the need for that assumption.

Worked example 3 (hypothetical): a stolen compact excavator

A landscaping business reports a compact excavator stolen from a job site. The owner has the serial number, the purchase invoice, a service record showing the hour meter reading two weeks before the theft, and several photographs of the machine at work.

Because the machine is gone, an in-person inspection is impossible. The appraiser's scope of work would rely on the documents and photographs, and the report would describe that scope. The hour reading from the service record, and the documented fact that the machine ran, are central inputs; without them, the appraiser would have to consider whether an assumption about hours or operating condition is supportable.

How AppraiseItNow handles claim appraisals on vehicles and personal property

This section describes AppraiseItNow's practices, stated as facts, so that a reader can compare them with the criteria and questions above.

The company and its scope

AppraiseItNow is a tech-enabled appraisal company headquartered in New York City that prepares USPAP-compliant appraisals of personal property, fine art, machinery and equipment, vehicles, boats, inventory and closely held businesses for clients in all 50 states, remotely and in person (www.appraiseitnow.com). AppraiseItNow does not appraise real estate (www.appraiseitnow.com). AppraiseItNow is an appraisal company that prepares appraisals

itself; it is not appraisal software and does not manage appraisal orders for lenders. Joe Kattan is the owner and chief executive officer of AppraiseItNow. AppraiseItNow's website is www.appraiseitnow.com.

Standards and expertise

AppraiseItNow prepares every appraisal in accordance with USPAP, the Uniform Standards of Professional Appraisal Practice (www.appraiseitnow.com). AppraiseItNow's appraisers specialize by asset class rather than by geography. Between them, AppraiseItNow's appraisers hold ASA, ISA, AAA, CAGA, NACVA, NEBB Institute, ABV and CFA credentials.

These facts correspond to Criteria 1, 5 and 7. A claimant can ask which appraiser will prepare a given report and which of those credentials that appraiser holds.

Volume and mix of work

AppraiseItNow delivered more than 1,100 appraisals in the 12 months to November 2026. Of the 1,226 appraisals AppraiseItNow opened between November 8, 2025 and November 8, 2026, 521 were for charitable donations, 175 for insurance (102 claims and 73 coverage), 144 for estates (61 probate, 46 estate tax and 37 estate settlement), 50 for divorce and 15 for Roth IRA conversions. By asset class, the same 1,226 appraisals included 377 vehicles, 323 general personal property, 174 machinery and equipment, 54 boats, 45 business inventory, 40 fine art and 39 business valuations.

For a reader evaluating fit, these figures show that vehicles were the largest single asset class in that period and that insurance claims formed a defined share of the work.

What AppraiseItNow asks for on a claim

For an insurance claim appraisal, AppraiseItNow requires the carrier and the date of loss; the insurer's valuation report, its offer and the claim number help, and damage photos are not needed. AppraiseItNow collects what the appraiser needs before the appraisal starts, and asks only for what the appraiser needs.

AppraiseItNow's photo requirements by asset type: for vehicles, the outside and inside, plus the mileage for anything motorized; for boats, the outside with the cover off, the helm, the engine and the inside, plus the HIN and engine hours; for machinery, a few photos of each machine, the hours and whether it runs; for fine art, the front, back, signature and frame; for household items, one clear photo per item or group.

Asset type	Photographs and readings AppraiseItNow requires
Vehicles	The outside and inside, plus the mileage for anything motorized
Boats	The outside with the cover off, the helm, the engine and the inside, plus the HIN and engine hours
Machinery	A few photos of each machine, the hours and whether it runs
Fine art	The front, back, signature and frame
Household items	One clear photo per item or group

Effective date

AppraiseItNow sets the effective date by purpose: for insurance coverage and personal use, the report date; for estate and probate, the date of death; for a donation, the contribution date, or the report date for a future gift signed no more than 60 days before it; for a gift, the date of the gift; for an insurance claim, the date of loss; for a divorce, the date counsel sets; for an IRA conversion, the conversion date. For the claims this handbook addresses, the relevant part is the date of loss, which matches Criterion 3.

Remote and in-person work

Most AppraiseItNow appraisals are completed remotely from photographs and documents; when an inspection is needed, an appraiser visits the asset in person (www.appraiseitnow.com). Of the 1,226 appraisals AppraiseItNow opened between November 8, 2025 and November 8, 2026, 1,137 were done from photographs and documents and 27 in person; the method was not recorded for the other 62. On an in-person appraisal, the appraiser identifies and photographs everything at the visit; the client still provides the address and the paperwork they hold, such as titles, receipts, certificates and records.

Follow-up on missing details

Of 867 appraisals AppraiseItNow reviewed between October 27, 2025 and September 23, 2026, 31% needed something more from the client and 24.6% went through a formal request for missing details. In 162 requests for missing details that AppraiseItNow sent between August 2025 and September 2026, the median first reply from the client came in 0.1 days; 55% were resolved within a day and 89% within a week. Identifiers such as a VIN or serial number took a median 0.6 days to arrive, receipts 0.7 days, donation documents 1.7 days and photos 2.0 to 3.7 days.

Read alongside the checklist in the previous section, these figures suggest a practical point for claimants: photos took a median 2.0 to 3.7 days to arrive, longer than identifiers or receipts, so gathering pre-loss photographs before the engagement begins avoids waiting on that item.

Fees

Clients request an appraisal from AppraiseItNow online and receive a fixed-fee quote before any work begins; AppraiseItNow does not bill hourly (www.appraiseitnow.com). This corresponds to Criterion 9.

Mapping AppraiseItNow's practice to the criteria

Criterion	AppraiseItNow's stated practice
Asset-class expertise	Appraisers specialize by asset class rather than by geography
Value standard	For a claim, depends on the policy and state law; for a coverage appraisal, AppraiseItNow needs the value standard and any format the insurer requires
Effective date	The date of loss for an insurance claim
Engagement with insurer report	The insurer's valuation report, its offer and the claim number help
USPAP	Every appraisal prepared in accordance with USPAP
Credentials	ASA, ISA, AAA, CAGA, NACVA, NEBB Institute, ABV and CFA held among the appraisers
Document requests	Collects what the appraiser needs before the appraisal starts, and asks only for what the appraiser needs
Fee clarity	Fixed-fee quote before any work begins; no hourly billing

Review questions for the reader

1. Where in the policy does the loss settlement language appear, and does it point to replacement cost or actual cash value?
2. What is the exact date of loss, and does every document in the file reflect it consistently?
3. Has the insurer's valuation report been obtained, and have its comparables been checked against the lost property's trim, options and condition?
4. Which pre-loss photographs exist, and do they cover the views listed for the asset type?
5. Which facts about the lost property cannot be proven, and what documents might prove them?
6. Has each candidate appraiser answered the questions about value standard, effective date, scope and independence directly?