



INSPECTION ORDER FORM

DATE: _____ REQUESTED BY: _____ PHONE: _____

PROPERTY OWNER(S) :

NAME : _____

ADDRESS: _____

PHONE : _____

TENANT INFO :

NAME : _____

PHONE : _____

BILLING ADDRESS (IF DIFFERENT) : _____

PROPERTY INFORMATION :

AGE OF STRUCTURE : _____

CRAWL OCCUPIED ATTACHED GARAGE RM. ADDITION

SLAB VACANT DETACHED GARAGE BASEMENT

TYPE OF INSPECTION : * N/C = NO CHARGE

ANNUAL \$35.00 PRE-INSP N/C 2ND OPINION N/C ESTIMATE N/C

WOOD DESTROYING/ORGANISM REPORTS \$75.00 WARRANTY RENEWAL

REAL ESTATE CLOSING INFORMATION :

CLOSING DATE : _____

CLOSING ATTORNEY : _____

DELIVER FAX # _____ MAIL OTHER

ADDRESS : _____

INVOICE : CLOSING OWNER/OUTSIDE OTHER