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FHA Inspection Request

Owner's Name: _____ Phone: _____

Owner's Address: _____

Inspection Address: _____

Reinspection Loan type: FHA Conventional

Bill To: _____ Phone: _____

Address: _____ Fax: _____

E-mail: _____

Signature: _____ Date: _____

Deadline: _____ Date of Closing: _____

I, _____, am requesting an FHA Inspection to be completed for the "Inspection Address" referenced above. The financially responsible party has agreed to this request and has signed under "Bill To" above. I understand that, in the absence of a signature above, I, and/or my company, will be held responsible for the cost of inspection.

Requested by: _____ Phone: _____

Signature: _____ Date: _____

TERMS OF CONTRACT: The purchaser agrees to pay for the above services at Kanab, Utah within 30 days of this invoice. If not paid, a FINANCE CHARGE OF 2% PER MONTH (annual percentage rate 24%) will be charged on all overdue accounts. Client also agrees to pay all costs of collection, including court costs, collection agency fees and reasonable attorney fees whether or not a suit is filed.

OFFICE USE ONLY

Date Requested: _____

Date Completed: _____

Completed by: _____

Pass Fail Reinspection: _____

INSPECTION FEES

FHA Inspection \$475
Re-Inspection \$200
Eng. Structural Inspection T & E

TRAVEL FEES

Page/Big Water \$225 Cedar Mountain \$250
Canebeds \$225 Orderville \$125
Other: Cost: