

Thomas Avant
PE, SE, PLS
CEO

Mike Downward, PE
VP Structural



Joshua Beazer, EIT
VP Civil

Chris Heaton
VP Development

Manufactured Home Inspection Request

Property Owner's Name: _____ Phone: _____

Property Owner's Address: _____

Inspection Address: _____

Reinspection Loan type: FHA Conventional VA Other

I, _____, am requesting an Inspection to be completed for the "Inspection Address" referenced above. I understand that **I, and/or my company, will be held responsible for the cost of inspection.**

Bill To: _____ Phone: _____

Full Address: _____ E-mail: _____

Signature: _____ Date: _____

Deadline: _____ Date of Closing: _____

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.

LIMITATION OF LIABILITY: In recognition of the relative risks and benefits of the Project to both the Client and the Consultant, the risks have been allocated such that the Client agrees, to the fullest extent permitted by law, to limit the liability of the Consultant and Consultants officers, directors, partners, employees, shareholders, owners and subconsultants for any and all claims, losses, costs, damages of any nature whatsoever or claims expenses from any cause or causes, including attorneys' fees and costs and expert-witness fees and costs, so that the total aggregate liability of the Consultant and Consultants officers, directors, partners, employees, shareholders, owners and subconsultants shall not exceed \$850.00, or the Consultant's total fee for services rendered on this Project, whichever is greater. It is intended that this limitation apply to any and all liability or cause of action however alleged or arising, unless otherwise prohibited by law.

OFFICE USE ONLY

Date Requested: _____ Date Completed: _____
Completed by: _____ Pass Fail Reinspection: _____

INSPECTION FEES

Inspection \$500
Re-Inspection \$225

TRAVEL FEES

Page/Big Water \$275 Cedar Mountain \$250
Colorado City \$225 Orderville \$125

P.O. Box 55 ◻ 460 East 300 South, Suite 1, Kanab, UT 84741
◻ Office (435) 644-2031 ◻

InspectionRequest 22-0517