



REAL ESTATE AGENT INFORMATION

Agent Name: _____
 Agent Ph. #: (office) _____ (cell) _____
 Agent Email: _____ @ _____
 Request made by: _____
 Requestor Ph. #: _____

CLIENT INFORMATION

Client Name: _____
 Client Ph. #: (home) _____ (cell) _____
 Client Email: _____ @ _____

PROPERTY INFORMATION

Property Type: Single Family Condo Townhome Villa
 Property Address: (street address) _____
 (neighborhood) _____ Year Built: _____
 Property Size: Single Family _____ sq.ft. / (Condo/T-home/Villa) _____ # brms.
 Property Vacant: Yes No
 Contact for Access: _____

INSPECTION INFORMATION

Inspection Date Needed: Need Done "BY" : _____
 (choose one) Need Done "ON" : _____
 Report Sent to: Client Agent Both

This form can be printed, filled in, and faxed to us at 858-923-1169