

RID-A-BUG EXTERMINATING CO INC.

PO BOX 83

MOORESVILLE NC 28115

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FAX# 704-664-7122

* INSPECTION AGREEMENT *

INSPECTION FEE AMOUNT: \$ _____ > _____ PAY AT THE INSPECTION _____ PAY AT CLOSING

CHECK # _____

CASH \$ _____

NOTE: CREDIT CARD INFORMATION IS REQUIRED AS A SECURITY DEPOSIT ONLY IF YOU INTEND TO PAY AT CLOSING. IF " PAY AT CLOSING" IS CHECKED WE WILL ONLY CHARGE YOUR CREDIT CARD IF PAYMENT IS NOT RECEIVED WITHIN 45 DAYS OF THE INSPECTION . WE WILL NOT CHARGE YOUR CARD OTHERWISE WITHOUT YOUR PERMISSION.CREDIT CARD INFORMATION PROVIDED IS SUBJECT TO VERIFICATION.

CREDIT CARD TYPE: _____ VISA _____ MASTERCARD EXPIRATION DATE: _____ / _____

CREDIT CARD NUMBER: _____ - _____ - _____ - _____

3 DIGIT SECURITY CODE _____

NAME ON CARD: _____ (EXACTLY AS ON CARD)

PLEASE PRINT

>PROPERTY ST. ADDRESS _____

> SQUARE FOOTAGE _____

>PROPERTY CITY ADDRESS _____

>HOUSE AGE _____

>PRINT REALTOR NAME: _____

>CLOSING DATE _____

>CLIENT CURRENT ADDRESS: _____

> CLOSING ATTY _____

>CLIENT CITY,STATE,ZIP: _____

>PRINT CLIENT NAME: _____

CLIENT # _____

>CLIENT SIGNATURE: _____

TODAYS DATE: _____

>EMAIL ADRESS: _____

BY MY SIGNATURE ABOVE ,I (CLIENT) ACKNOWLEDGE THAT I HAVE READ THIS AGREEMENT ,ACCEPT THE SERVICES DISCLOSED ,AND I UNDERSTAND THE TERMS AND CONDITIONS AND I AGREED TO BE BOUND BY THESE .MY SIGNATURE ABOVE AUTHORIZES THE RELEASE OF INSPECTION REPORT TO MY REAL ESTATE AGENT,UNLESS SPECIFIED OTHERWISE IN WRITING.