



Application for  
**PRESALE CERTIFICATE OF INSPECTION**

**OWNER'S INFORMATION**

Applicant Identity:  Owner  Owner's Agent  
Is the property bank-owned:  Yes  No

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Principal Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Email: \_\_\_\_\_  
Mailing Address (if different than above): \_\_\_\_\_  
City/State/Zip \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

**OWNER'S AGENT INFORMATION**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Company Name \_\_\_\_\_ Alt. Phone: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_ Email: \_\_\_\_\_

**PROPERTY INFORMATION**

<b>A. Property Address (include all units):</b>	_____
<b>B. Property Type.</b>	<input type="checkbox"/> Single Family House <input type="checkbox"/> Condo/Townhouse <input type="checkbox"/> Duplex

*For Office Use Only :*

Received by \_\_\_\_\_ Case no. \_\_\_\_\_ Date \_\_\_\_\_

SINGLE FAMILY     DUPLEX     CONDO/TOWNHOUSE

OPEN CODE CASE:     YES     NO

METHOD OF PAYMENT:     CASH     CHECK     CREDIT CARD

INSPECTION FEE: \_\_\_\_\_ SW ASSESSMENT FEE: \_\_\_\_\_

INSPECTION DATE: \_\_\_\_\_ INSPECTION TIME: \_\_\_\_\_