



INSPECTION REQUEST FORM

(BILLING INFO MUST BE COMPLETED IN ORDER TO SCHEDULE INSPECTION(S); WE WILL CONTACT YOU TO SCHEDULE)
(IF NECESSARY TO CANCEL INSPECTIONS AFTER SCHEDULED PLEASE DO SO IN WRITING/EMAIL TO AVOID FEES)

PLEASE EMAIL: allstar_construction@live.com /or FAX TO 209-677-3397

PROPERTY ADDRESS: _____ CITY: _____

ORDERED BY: _____ PHONE: _____

PLEASE ATTACH COPY OF MLS FOR PROPERTY

HOME
☐

PEST
☐

ROOF
☐

YEAR BUILT: _____ APPROX. SQUARE FOOTAGE: _____ VACANT : ☐ YES ☐ NO

DETACHED STRUCTURES: ☐ NO ☐ YES, PLEASE DESCRIBE _____ INSPECTING ☐ NO ☐ YES

SEWER: ☐ SEPTIC ☐ DISTRICT

WATER: ☐ WELL ☐ DISTRICT

FOUNDATION: ☐ SLAB ☐ POST & PIER

EXTERIOR: ☐ STUCCO ☐ WOOD

☐ MOBILE MANUFACTURED HOME

REALTOR OPINION OF OVERALL CONDITION OF STRUCTURE: ☐ EXCELLENT ☐ GOOD ☐ FAIR ☐ POOR

LISTING AGENT: _____ PHONE #: _____

SELLER INFO: _____

SELLER PHONE/EMAIL: _____

BUYERS AGENT: _____ PHONE #: _____

BUYERS NAME: _____

BUYERS PHONE/EMAIL: _____

INSPECTION FEE TO BE PAID AT TIME OF INSPECTION. REPORTS WILL NOT BE SENT OUT PRIOR TO PAYMENT

SEND REPORTS TO: _____

HOW WILL WE GAIN ACCESS? ☐ PICK UP KEYS AT: _____ ☐ MEET THERE

☐ COMBO/LOCK BOX: _____ ☐ CALL FOR ONE DAY CODE: _____

☐ OTHER: _____

NOTES: _____