CLIENT INTAKE FORM

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|  | Name | | | | | |
| CLIENT INFORMATION | Email  **Historic Property?**  **Phone:**  **EIN/Tax ID:** | | | | | |
| Address | | | | | |
| Current Property Use Single family 2-Unit dwelling Multi-unit dwelling | | | | | |
| Certificate of Occupancy | | | | | |
| How did you hear about us? | | | | | |
| Primary contact | | | | | |
| PRIMARY SERVICES NEEDED | | | | | |
| Project address | | | | | |
|  | Permit Expediting |  | Mechanical Permit |  | Third Party Plan Review & Inspections |
|  | Building Code Consulting |  | Electrical Permit |  | Environmental Inspections |
|  | Architectural/Engineering Design |  | Plumbing Permit |  | LEED Consulting |
| Scope of Work  Estimated construction cost: | | | | | |
| Office Data: | | | | | |
| Rate  Previous Client ⌂Yes ⌂No  Project Type ⌂Commercial ⌂Residential ⌂Other  Jurisdiction: | | | | | |
| Special Notes: | | | | | |
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