



Settlement Date: _____

Ordered by: _____ Selling Agent Buying Agent

Please Fill Out All Fields and Return Via Email

<p>REAL ESTATE INSPECTION</p> <p>Property Address: _____ Vacant <input type="checkbox"/> Y <input type="checkbox"/> N</p> <p>ACCESS: _____ LOCKBOX COMBO: _____</p>
<p>SELLER INFO: Name: _____ Email: _____</p> <p>Phone: _____</p>
<p>SELLING AGENT Name: _____ Company: _____</p> <p>Email: _____ Phone: _____</p> <p>Address: _____</p>
<p>BUYERS AGENT</p> <p>Name: _____ Company: _____</p> <p>Email: _____ Phone: _____</p> <p>Address: _____</p>
<p>SETTLEMENT COMPANY</p> <p>Co: _____ Processor: _____</p> <p>Phone: _____ Email: _____</p> <p>Fax: _____</p> <p>Address: _____</p>
<p>NOTES:</p>

SUBMIT

Please fill out and return to:
 jack.rossi@rossipestservices.com
 or
 joe.rossi@rossipestservices.com