

## REQUEST FOR CONSULTATION

This is to request that MPDA SSI complete an CONSULTATION for the project listed below. It is agreed that a deposit for this consultation fee of **\$1,200.00** (plus GST) will be paid prior to inspection of said project. Additional charges (if applicable) will be due prior to release of the written consultation report.

DATE REQUESTED:  PROJECT NAME:

LOCATION:

REASON FOR REQUEST:

CONTACT NAME:

PHONE:  CELL:

EMAIL:

*PAY BY CREDIT CARD OR SEND EFT TO: ACCT@MPDA.NET*

PO REF:  VISA:  MC:

CARD NO:  EXP:

NAME:

COMPANY NAME & BILLING ADDRESS (IF DIFFERENT TO THE ABOVE):

BY SIGNING BELOW I AGREE TO THE TERMS LISTED ON THIS FORM

CUSTOMER SIGNATURE:  DATE:

TO BE COMPLETED BY MPDA OFFICE:

ASSIGNED INSPECTOR:  FILE #:

PLEASE DIRECT INQUIRIES TO: ADMIN@MPDA.NET