

## REQUEST FOR MPI CERTIFIED ARCHITECTURAL COATING INSPECTOR

PROJECT NAME:

PROJECT ADDRESS:

### PAINTING CONTRACTOR

NAME:

ADDRESS:

CONTACT:

PHONE:

EMAIL:

### SPECIFYING AUTHORITY

NAME:

ADDRESS:

CONTACT:

PHONE:

EMAIL:

### GENERAL CONTRACTOR

NAME:

ADDRESS:

CONTACT:

PHONE:

EMAIL:

**OWNER/REP**NAME: ADDRESS: CONTACT: PHONE: EMAIL: **SPECIAL COMMENTS**CONTRACT PRICE: ☐

NEW:

☐

REPAINT:

APPROX. START DATE: APPROX. DATE OF COMPLETION: 

Please note that an additional charge of \$200.00 per hour may be billed to the current Painting Contractor for extra/excessive final follow-up inspections. We also reserve the right to reject any inspection project.

**TO BE COMPLETED BY THOSE RESPONSIBLE FOR PAYMENT OF INSPECTION**

By signing below, the contractor or firm agrees to pay **Glendonnan Technical Services Ltd.** a fee of 5% of the painting contract price shown above (plus applicable taxes) for the inspection services to be rendered by the inspection company. If the cost of the contract is less than \$8000.00 a minimum fee of \$400.00 will be charged. Out of town projects are 5% of painting contract value plus travel costs, contact our office for potential per visit charges. The inspection fees of 5% will be reflected for the total contract price at the date of substantial completion including all extras and additional work.

Purchase Order #: EMAIL: BILLING NAME: 

BILLING ADDRESS (IF DIFFERENT THAN THE ABOVE):

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

DATE: SIGNED: **TO BE COMPLETED BY OFFICE:**

MPI CACI INSPECTOR:

Glen Ashmore MPI CACI #00205

FILE #: