

**CITY OF COLUMBIA HEIGHTS COMMUNITY DEVELOPMENT
APPLICATION FOR VOLUNTARY POINT OF SALE HOME INSPECTION
590 40TH Avenue NE, Columbia Heights, MN 55421**

ADDRESS OF PROPERTY: _____

Present Owner: _____

Address: _____

Phone #: _____

E-Mail Contact Info: _____

Should Report be: mailed to above address or e-mailed?

Please note: Any corrections noted must be made and re-inspected. Once a home passes the re-inspection, a letter shall be provided to the buyer and seller. This service is a voluntary request made by a buyer or seller and is only meant to provide basic information about the condition of the home. This report is not meant to substitute any requirements that a lender or mortgage company may have in order to complete the sales transaction.

Owner/Representative Signature: _____

By signing this application the owner/representative is giving the city permission to enter the property and conduct said inspection.

DATE OF APPLICATION: _____

\$160/unit Fee Paid: Check _____ Credit Card _____

Paid by: Owner _____ Mgmt. Agent _____

Person/Company Making Application if different from above:

Address: _____

Phone #: _____ **E-Mail:** _____

*All utilities must be current and active in order for the inspection to take place.

**The inspection does not address formaldehyde, lead paint certification or abatement, any airborne gas, asbestos, insects and animal pests, hazardous waste, nor does it determine source or type of mold that may be present.

***This inspection does not indicate compliance with any inspection program other than that of the City of Columbia Heights. This inspection made by the City does not constitute any representation, guaranty, or warranty to any person as to the conditions of buildings inspected. The City of Columbia Heights does not intend any reliance to be made on this inspection and does not assume any responsibility or liability in the inspection and certification of compliance. This inspection is valid for 6 months from date of inspection.