

HOME INSPECTION REQUEST POLICY & FORM

- A home inspection/systems check is available to any purchaser on insured and uninsured sales. The intent of the inspection is to identify major defects only. A professional inspector must perform the inspection.
- The purchaser has 15 days from the date of HUD's acceptance of a sales contract to have the inspection completed. Failure to comply with this time frame may forfeit purchasers right to an inspection with utilities on.
- Up to \$200 of the cost may be financed when a FHA loan is involved; or included as a closing cost on Line 5 of the Sales Contract.
- The agent must submit a "Home Inspection Request" to the AFR & Associates, Inc. A copy of the accepted contract must be attached as well as a \$75.00 cashier check, or money order, made out to AFR & Associates, Inc. for the re-winterization.
- The utilities must be activated by the purchaser or agent, (in the purchaser's name). The utilities may not remain on for more than two days (48 hours).
- Purchaser is responsible for all expenses resulting from the inspection, including repair of damage to the property within the two days (48 hours).
- The agent must be present during the inspection.
- The agent is responsible for ensuring that the property is returned to the same condition as before the inspection.
- Immediately upon completion of the Home Inspection, the agent will enter the Inspection completion date on the Home Inspection Request and fax AFR & Associates, Inc. (404-222-9187).
- The purchaser may not make any additional repairs to the property prior to closing.
- If the inspection discloses a major defect, the following will apply:
 - a) Insured Sales: The purchaser may either close "as is" or be released from the contract with earnest money refunded, provided HUD concurs with the inspection report, receives the written request within 15 days of contract acceptance, and HUD elects not to make repairs. A copy of the inspection report must be attached to the request for sales contract cancellation.
 - b) Uninsured Sales: No repairs will be authorized. The inspection will not be a basis for canceling the sale.
- **If utilities cannot be on due to code violations, known defects, or utility company policy, the Home Inspection Request will be denied.**

AFR & Associates, Inc.
34 Peachtree Street NW, Suite 2100, Atlanta, GA 30303
Phone 404-222-0335 Fax 404-222-9187

HOME INSPECTION REQUEST POLICY & FORM

Selling Agent Name: _____ Fax #: _____
Phone: _____ Cell: _____

We are requesting permission to conduct a home inspection/systems check on the following property:

FHA Case #: _____
Street, City, Zip: _____

We Understand the Following:

The utilities will be turned on in the purchasers' name. The Home Inspection will be performed by a professional inspector. The purchasers understand they are responsible for the cost of utility services, and that the utilities will remain activated no longer than 2 days (48 hours).

The purchasers understand he is responsible for all expenses resulting from the systems check, including repair, if necessary, of damage to the property. From November 1 to March 31 of each year, a \$75.00 cashier check or money order fee for re- winterization of the property is required with this form.

The selling agent has furnished a copy of page 2 of this form of HUD's "Home Inspection Request Policy & Form" to the purchaser and explained the purchaser's responsibilities. A copy of the accepted contract is attached. Seller will notify AFR & Associates, Inc. of the Home Inspection completion date. (See below)

1) Water Utility Name _____
2) Gas Utility Name _____
3) Power Utility Name _____

Purchaser	Date	Selling Agent	Date
_____	_____	_____	_____

***** To be completed by AFR & Associates, Inc. ONLY (Property Management Office)*****

Permission to conduct home inspection/system check given by:

By AFR & Associates, Inc: _____ Date: _____

Confirm T/O: _____ Verified in HT: _____ File Updated: _____

After the Inspection has been completed, fill-in Items below, sign & Fax 404-222-9187 attention K James.

1) Inspection was completed on (date) _____
2) Water Utility Turn Off Scheduled (date) _____
3) Gas Utility Turn Off Scheduled (date) _____
4) Power Utility Turn Off Scheduled (date) _____

I have contacted all of the utility companies for which service was connected to perform the home inspection. I have instructed each of the utility c companies to disconnect service.

Print Name: _____ Signature: _____

Date: _____