



228-232 Wyndham St Shepparton 3630  
Ph 03 58218388 Fax 03 58215492

**Request for an Inspection**

- *Photo identity required*

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address of property to inspect: \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

Contact details:

Contact details:

Mobile \_\_\_\_\_

Mobile \_\_\_\_\_

Home \_\_\_\_\_

Home \_\_\_\_\_

Work \_\_\_\_\_

Work \_\_\_\_\_

Preferred time for an inspection .....