

## THE SCOPE OF THE INSPECTION

► HOME INSPECTION  
AUTHORIZATION FORM

**Property** Address: 518 Millwood Inspection Date: April 17/08  
Toronto Inspection Time: 9<sup>00</sup> AM

**Client** Name: LISTING AGENT Home Phone: \_\_\_\_\_  
Address: Judith Kinnear Business Phone: \_\_\_\_\_  
Mobile Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Email: \_\_\_\_\_

**Fee** Base Fee: \$ \_\_\_\_\_  
Tax: \$ \_\_\_\_\_  
Total Fee: \$ \_\_\_\_\_ payable at the time of the inspection.

## PLEASE READ CAREFULLY BEFORE SIGNING.

The Inspection of this property is subject to the **Limitations and Conditions** set out in this Agreement. The report is based on a **visual examination** of the readily accessible features of the building.

The Inspection is performed in accordance with the **Standards of Practice of the American Society of Home Inspectors/Canadian Association of Home and Property Inspectors**. A copy of these Standards is attached for your reference.

The Home Inspector's Report is an opinion of the **present condition** of the property. It is not a guarantee, warranty or an insurance policy with regards to the property.

I have read, understood and accepted the above Limitations and Conditions of this Home Inspection.

Date: April 17/08  
Client Signature: not present

On behalf of: (Company) AITKEN HOME INSPECTIONS  
Payment Received in Full: (Signature) [Signature]  
Inspector: (Print Name) SCOTT AITKEN

*Note: The inspection report is for the exclusive use of the client named above. No use of the information by any other party is intended.*

