



**Info@allessi a com**

Fax: (719) 540-2781

Ordered By: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

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**RESIDENTIAL IMPROVEMENT LOCATION CERTIFICATE**

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Date: \_\_\_\_\_ Client/ Borrower : \_\_\_\_\_

Property Address: \_\_\_\_\_

Legal Description: \_\_\_\_\_

Title Company: \_\_\_\_\_

Commitment No: \_\_\_\_\_

Closer's Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

Email: \_\_\_\_\_

**DUE DATE:** \_\_\_\_\_

**Closing Date:** \_\_\_\_\_

**Invoice/ILC Delivery**

**Fax**



**Postal**



**E-mail**



Select Preferred Method(s)

**Info@allessi a com**

**Required: Attach a copy of**

**“Schedules A and B2 of the”**

**“TITLE COMMITMENT”**

Description and Easements of Record

Please Notify us of existing Access Restrictions: ( Dogs, Locked Gates, Gate Code, etc.)

**COMMENTS:** \_\_\_\_\_

## Agreement of Surveying Services Terms

We appreciate the opportunity to work with your company. If this is your first time ordering with us please read the Surveying Services Information and Terms Page, and contact us with any questions you may have. Please send us this signed and completed sheet with your order.

I, (Contact Printed) \_\_\_\_\_, Being the Authorized agent, have read and hereby agree to the terms and fees, and do hereby authorize Alessi and Associates. to proceed with the scope of work.

Client/Company: \_\_\_\_\_

Date: \_\_\_\_\_

Contact Signature: \_\_\_\_\_