



Info@alessi3a.com
Fax: (719) 540-2781

Client Name: _____
Address: _____
City/State/Zip: _____
Contact Person: _____
Phone: _____ **Fax:** _____
E-Mail: _____

Commercial IMPROVEMENT LOCATION CERTIFICATE

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@alessi3a.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, Inc. to proceed with the scope of work.

Client/Company: _____

Date: _____

Contact Signature: _____