

AUTHORIZATION TO INSPECT

Return To:
Mutual Operations Division
Inspections Department
800 Rockview Drive
Walnut Creek, CA 94595

File No. _____

Address _____

Carport/Garage _____

In accordance with Mutual policies, I/we hereby authorize Mutual Operations Division to inspect my/our manor identified above to determine whether the condition of the manor and exclusive use common area assigned to my/our manor comply with the policies and declaration of covenants, conditions and restrictions (CC&R) (or Occupancy Agreement in the case of a cooperative mutual) of my/our mutual and any alteration permit or alteration agreement relating to my/our manor.

I/we further understand and agree that the inspection (Compliance inspection in TWCM) will also include the exclusive use common area assigned to my/our manor, and any landscape installation and other alterations, wherever located, for which I/we am/are responsible. I/we acknowledge and agree that the inspection undertaken by MOD is not a substitute for a "home inspection" performed by a qualified professional retained by me/us or the buyer(s), and the inspection by MOD is conducted for the sole benefit of MOD and the Mutual and shall not be relied upon by me/us or the buyer(s) as a representation or warranty of the condition of the areas inspected or that such condition complies (or does not comply) with applicable governmental codes or ordinances. As required for the inspection, I/we have indicated the status of my/our manor:

_____ The manor is presently occupied.

_____ The manor is furnished or staged, but not occupied.

_____ The manor is vacant (NOT furnished or staged and NOT occupied)

The member or the member's authorized representative must be present to unlock the manor at the time of each inspection and, if the manor is furnished, must remain in the manor during the inspection.

_____ I will be present at the time of inspection.

_____ I have authorized my real estate agent to represent me for the inspections.

_____ I have authorized the following person to represent me for the inspections.

Name & Telephone: _____

A copy of the Inspection/Compliance Inspection Report is provided to the owner and their real estate agent. Please indicate below the name and address of your real estate agent. Unless forwarding address is provided the report will be emailed to the selling agent only. Please provide the information below:

Agent/Company: _____

Address: _____

Cell No/Office No: _____

E-mail Address: _____

E-mail Address: _____

IMPORTANT

UTILITIES MUST BE ON IN THE MANOR FOR THE INSPECTIONS

An appointment will not be scheduled without receipt of the signed form and fee. No unit will be inspected if work is in progress, and complete access is not provided (i.e.: Painting, Masking)

Address (if different than listed above)

Member(s) Name

(Print Clearly)

Additional Address

Member(s) Signature

Date

Telephone:

FEF: \$350.00 includes Initial and one Final Inspection. Any required re-inspections will be \$125.00 each, due when making appointment. Fee can be paid by check or credit card (Visa or Mastercard). Please make check payable to Golden Rain Foundation (GRF). **Expires 6 months after initial inspection.**