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**Home inspection Authorization**

I, \_\_\_\_\_, authorize NMHI to perform a  
**person or company authorizing inspection**

general home inspection at this location:

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

I acknowledge that there will be a fee paid in the amount of \$\_\_\_\_\_ (plus tax) for the home inspection and a subsequent report of the inspection findings.

Payment is to be made the day that the inspection has been completed unless other payment arrangements have been agreed upon with NMHI.

\_\_\_\_\_  
**Signature of authorization**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Your phone number**

**Where do you want report sent?**

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

FAX number: \_\_\_\_\_

**You may fax this form to 505-992-1361**

**Thank you for choosing New Mexico Home Inspections, Inc.**