



VACUUM TRUCK SERVICE

775-825-1595 Office / 775-825-1692 Fax

Seller(s): _____ Buyer(s): _____

Property Address: _____

City: _____ State: _____ County: _____ Zip Code: _____

Listing Agent Real Estate Firm: _____

Realtor: _____ Phone Number(s): _____

Email: _____@_____

Buyers Agent Real Estate Firm: _____

Realtor: _____ Phone Number(s): _____

Email: _____@_____

Title Co: _____ Escrow #: _____

Escrow Officer: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____@_____

Please answer the following 'Yes' or 'No' questions in order to avoid delays/return visit fees:

- Water is on at property w/ outside garden hose bib (Y/N): _____
- Both septic tank lids (lids are typically 18" or larger) are fully exposed (Y/N): _____
- Waters will have to locate and/or dig to expose the lids to the septic tank (Y/N): _____
- Home is owner/tenant occupied (Y/N): _____ If vacant, specify how long: _____

Notes (optional): _____

Acceptance of Liability for Payment (only 1 signature per financially responsible party is needed)

By signing below, I hereby certify that the information supplied on this form is correct to the best of my knowledge and authorize Waters Vacuum Truck Service to perform work at the above property. I am aware that any missing or incorrect information may result in delays and/or additional service visit charges. I accept liability for payment and agree to pay Waters for services rendered in full, if escrow cancels or fails to close within 90 days of date of service.

Seller Signature: _____ **Print:** _____ **Date:** _____

Buyer Signature: _____ **Print:** _____ **Date:** _____