



# TERRAZZO, TILE AND MARBLE ASSOCIATION OF CANADA

## L'ASSOCIATION CANADIENNE DE TERRAZZO, TUILE ET MARBRE

Head Office : 163 Buttermilk Avenue, Unit 8, Concord, Ontario L4K 3X8 T: 905.660.9640 800.201.8599 F: 905.660.0513

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Email: association@ttmac.com Web Site: ttmac.com

### INSPECTION REQUEST FORM

(Please Type or Print)

A request for inspection will be accepted from: Member  Non-Member

Members Basic Inspection Fee: \$400.00

Non-Members Basic Inspection Fee: \$600.00

Additional Fees: \$100.00/Hour

Additional Fees: \$125.00/Hour

*(Basic Inspection fees include 1 hour travel time, a 1 hour site visit, and 2 hours for report research and written report. Any further expenses will be billed as additional fees. Mileage and GST extra.)*

**A SEPARATE LETTER STATING FULLY THE NATURE OF THE COMPLAINT MUST ACCOMPANY THIS REQUEST**

We hereby authorize the Terrazzo, Tile and Marble Association of Canada to arrange for an inspection of the following project:

Name of Project: \_\_\_\_\_

Inspection Address: \_\_\_\_\_ City: \_\_\_\_\_ P.C.: \_\_\_\_\_

Site Contact Name: \_\_\_\_\_ Tel#: \_\_\_\_\_ Fax#: \_\_\_\_\_

Architect/Designer (if applicable): \_\_\_\_\_

Owner(s) Name: \_\_\_\_\_

Trade Contractor: \_\_\_\_\_

Suppliers of Material: \_\_\_\_\_

Type of Installation: Terrazzo

Marble

Tile

Other

#### **WAIVER OF LEGAL RIGHTS**

We agree that any opinions expressed, verbally or written, by any authorized representative of the Terrazzo, Tile and Marble Association of Canada are without prejudice and are made with the sole objective of maintaining the highest possible standards in the terrazzo, tile, marble and stone industry. We agree that the Association or its authorized representative shall be absolved from any responsibility for any statements written or verbal, which may result in a recommendation for remedial work. The Association accepts no responsibility for payment for any repairs or replacements recommended as a result of such inspection.

#### **INSPECTION COSTS**

The party requesting the inspection agrees to be responsible for any costs that the Terrazzo, Tile and Marble Association of Canada may incur as a result of this inspection. A cheque or VISA number for the Processing fee and basic inspection fee must accompany this inspection request form.

VISA No.: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Inspection requested by: (Name of Company) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_ P.C.: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

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