Office: 704-321-4484 psskinner@carolina.rr.com
www.MeasureMyLand.com

(ORDER FORM)

Date Due Requested:** ***(weather/schedule permitting)	**Today's Date:**	**Closing Date:**
Buyers Name(s) as it is should appear on the survey: **Please print.**		
Buyer Email:		
Buyer Phone#:		
Current Physical Address: (*for Billing*)		
PROPERTY TO SURVEY: *North Carolina ONLY* ☐ MECK ☐ UNION OTHER: _____		
Address of property you are buying to be surveyed):		
MLS#	Tax Id#	
Closing Attorney: Contact Name:	Email: Phone #:	
Real Estate Agent Name:	Email: Phone #:	

CREDIT CARD AUTHORIZATION: (*you may call this info in*) 704.321.4484

ESTIMATE AMOUNT: $	DATE:
Name on CARD:	
Email:	Phone #:
☐ MC ☐ VISA ☐ CHECK by Authorization	
Credit Card #:	
Expiration date:	CVS# (3 to 4 digits on back of card):
Billing Zip:	

READ CAREFULLY: **ORDER WILL NOT BE SCHEDULED WITHOUT BUYER'S SIGNAURE**

By signing below, I authorize A Strome Land Surveying Co. to perform a Land Survey on the above referenced property for my benefit and to charge my credit card upon completion of the field survey work or bill at closing. I understand the work may commence immediately. I have verified that all above information is correct on this survey order form. **I am responsible for payment for the services even if I do not purchase the property or if the fee is not collected at closing**. Reference is hereby made to the buyer's agency agreement and NC offer to Purchase contract (2-T 2017). **If I cancel before any field work is performed; I will not owe for the survey provided it was ACKNOWLEGED IN WRITING by A Strome Land Surveying. If I fail to cancel in time, I will pay the full fee.**

_____ _____ _____

Authorized Signature PRINT NAME Date: