



# PAINT QUALITY ASSURANCE™



**M.P.D.A. Specification Services Inc.**  
2800 Ingleton Avenue, Burnaby, BC V5C 6G7  
FAX: 604-298-7571 Phone: 604-298-3875

## REQUEST FOR CONSULTATION

*This is to request that MPDA SSI complete an INSPECTION/CONSULTATION for the project listed below. It is agreed that a deposit for this inspection/consultation fee of \$300.00 (plus HST for a total of \$336.00) will be paid prior to inspection of said project. Additional charges (if applicable) will be due prior to release of the written consultation report.*

**DATE REQUESTED:** \_\_\_\_\_

**LOCATION:** \_\_\_\_\_  
\_\_\_\_\_

**REASON for REQUEST:** \_\_\_\_\_

**CONTACT(S):** NAME: \_\_\_\_\_

PH: \_\_\_\_\_  FAX: \_\_\_\_\_

Email: \_\_\_\_\_  
*(please tick box for fax or email correspondence)*

**BILLING INFO:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PAYMENT METHOD:** *Only pre-qualified customers may pay on invoice. All others must pay by credit card or cheque **prior** to receiving the consult report.*

MASTERCARD  VISA

P.O. / CARD NO: \_\_\_\_\_ VALID/EXPIRY DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

**Please make cheque(s) payable to M.P.D.A. Specification Services Inc.**

**CUSTOMER SIGNATURE:** \_\_\_\_\_

**To be completed by Office:**

Assigned Inspector: \_\_\_\_\_ File #: \_\_\_\_\_