

REQUEST FOR W.I.R.

FROM



**HOUSE DOCTOR
EXTERMINATING**



3310 W. Bell Rd. #232, Phoenix, AZ 85053

Phone:602-993-1800 Fax:602-439-6876 E-mail: housedoctorxt@hotmail.com

Payment Type: CASH CHECK
 CHARGE ESCROW

Attention: David Ramos

License No: BL 8597

Buyer: _____

Seller/Owner: _____

Address: _____

City: _____ **Zip:** _____ **Phone:** _____

Listing Agent: _____

Phone: _____

Buyers Agent: _____

Phone: _____

Occupied/Lockbox/CBS code: _____

Would you like house doctor to order your home inspection?



Title Company: _____

Address: _____

City: _____ **Zip:** _____

Escrow Officer: _____ **Escrow #:** _____

Phone: _____ **Fax:** _____

Closing Date: _____

Instructions: _____
