



DAVIS LABORATORIES, INC.

NONDESTRUCTIVE INSPECTION

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31 AIRPORT BLVD., SUITE C., SOUTH SAN FRANCISCO, CA 94080 (650) 583-8322 FAX (650) 583-8206
TOLL FREE (888) 889-9729

This letter is to confirm that _____ is establishing a cash-on-delivery, (C.O.D.), account with Davis Laboratories for field inspection services.

When the crew arrives to begin work they will verify that there is cash or a blank check on the jobsite or that credit card information has been provided before commencement of work. If either method of payment is not available and can not be obtained prior to start of work for each day of work then the job will be cancelled and rescheduled.

If cancellation of the job occurs there will be a call-out/cancellation fee equal to the 4 hour on-site minimum or the actual time accrued by the crew, (whichever is greater).

If a blank check can not be left at the jobsite, then a check for 25% above the estimate is required to be sent to our office prior to the scheduled day of work. In this case the crew will not be permitted to work above or beyond what was scheduled to be accomplished. Any additional work will need to be scheduled by the office.

Any funds not used to cover expenses will be refunded, or if requested, they will be held on account as a credit for any future scheduled work.

Signature

Print Name

Title

Date

Please fill in credit card information if NOT paying by check on site.

Card type: Mastercard ___ Visa ___ American Express ___ (No Discover Card)

Card Number: _____

Expiration date: ___ / ___ mo / yr 3 digit code on back of card: _____

Billing Address: _____

City: _____ State: _____ Zip: _____
