

Certificate of Compliance As Is Agreement



I/We, the buyer of the residence located at,

Street: _____

City, State, Zip: _____

Have received a true copy of the compliance order or notice of violations issued by Metro West Fire Protection District. I/We hereby fully accept responsibility without condition for making the corrections or repairs required by such compliance order or notice of violation within 30 days of closing on the above property. Upon correction of violations I/We agree to contact the Division of Community Risk Reduction to schedule a re-inspection of the above residence.

Seller(s) Printed: _____

Seller's Agent: _____ Seller's Agent Phone: (____) - ____ - ____

Buyer's Agent: _____ Buyer's Agent Phone: (____) - ____ - ____

Buyer(s) Printed: _____

Buyer's Phone: (____) - ____ - ____ Buyer's Email: _____

Buyer's Email: _____

Buyer's Signature: _____

Buyer's Signature: _____

Buyer's signatures must be notarized

If you have any questions, please contact the Division of Community Risk Reduction at 636-458-2100 extension 3. Please fax completed form including notarized buyer's signature to 636-821-5980.