



# 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 PREPARATION OF SPECIFICATIONS

*This is to request that MPDA SSI prepare SPECIFICATIONS (Section 09900) for the project listed below. It is agreed that a deposit for this specification fee of \$500.00 (plus GST for a total of \$525.00) will be paid for upon receipt of this invoice. Additional charges (if applicable) will be due prior to release of the written specification report. Site Tour, if required \$200.00 (plus GST for a total of \$210.00).*

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

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

**CONTACT (S):** NAME: \_\_\_\_\_  
PH: \_\_\_\_\_  FAX: \_\_\_\_\_  
 Email: \_\_\_\_\_  
(please tick box for fax or email correspondence)

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

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

<b>PAYMENT METHOD:</b>				
<u>PURCHASE ORDER</u> <input type="checkbox"/>	<u>MASTERCARD</u> <input type="checkbox"/>	<u>VISA</u> <input type="checkbox"/>	<u>CASH</u> <input type="checkbox"/>	<u>CHEQUE</u> <input type="checkbox"/>
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 #: \_\_\_\_\_