

Cross Surveying, LLC

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WORK ORDER FORM

DATE ORDERED: _____ DATE DUE: _____ JOB#: _____

ORDERED BY: _____ COMPANY: _____

ADDRESS: _____

PHONE #: _____ FAX: _____ Other: _____

LEGAL DESCRIPTION:

LOT: _____ BLOCK: _____ UNIT: _____ SUBDIVISION: _____

PLAT BOOK: _____ PAGE: _____ Section: _____ Township: _____ Range: _____

Parcel ID: _____

JOB ADDRESS: _____

MORTGAGE

LOT & BLOCK 340
 METES & BOUNDS 351
 UPDATE 342
 ELEVATION CERTIFICATE 322
 RECERTIFICATION 360
 OTHER (EXPLAIN): _____

PERMITTING

VACANT (PERMIT ONLY) 300
 BLDG S/O ONLY 311
 BLDG S/O RESTAKE 312
 COMPUTER PLOT/SITE PLAN 301
 FOUNDATION 320
 FND/ELEV CERT 321
 FINAL 330
 FINAL/ELEV CERT 331
 ELEVATIONS 323
 ELEVATION CERTIFICATE 322

CERTIFIED TO:

BUYERS: _____

BANK: _____

TITLE: _____

UNDERWRITER: _____

PRICE QUOTE: _____ TO BE PAID: _____ APPROVED BY: _____

COMMENTS: _____

PLEASE NOTE:

WORK ORDER FORM MUST BE SIGNED AND FAXED BACK PRIOR TO WORK BEING PROSSED.