



# TRULY NOLEN PRIORITY WIR FAX ORDER

Please fill out completely and fax to (520) 322-9902.

Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Requested by \_\_\_\_\_, \_\_\_\_\_  
Agency Agent

Billing Name \_\_\_\_\_

Billing Address \_\_\_\_\_  
City/State/Zip

Contact Phone Number \_\_\_\_\_ WIR Requested On or Before \_\_\_\_/\_\_\_\_/\_\_\_\_

Specific Inspector Requested, if any \_\_\_\_\_

Inspection Address \_\_\_\_\_  
City/State/Zip

Inspection Contact \_\_\_\_\_  
Name (B = Buyer; S = Seller) Phone

Special Access Instructions, if any \_\_\_\_\_  
\_\_\_\_\_.

Final WIR Report needed by \_\_\_\_/\_\_\_\_/\_\_\_\_

Deliver to: \_\_\_\_\_  
Entity Name

Address \_\_\_\_\_  
City/State/ZIP

Attention \_\_\_\_\_  
Name Phone

Deliver via:  Mail  Fax to \_\_\_\_\_  Hand Deliver

### For Truly Nolen Office Use Only

Inspector Notes:

Escrow No. \_\_\_\_\_

Inspection Fee \$ \_\_\_\_\_

Tax \$ \_\_\_\_\_

Billing Total \$ \_\_\_\_\_