



REQUEST FOR INSPECTOR

CONTACT INFORMATION (Page 1 of 2)

Please assign an inspector to inspect the painting and decorating of the project described below to ensure that the work is done in accordance with the specifications and the MPI Quality Assurance Program:

Project Information

Project Name:	Date of Tender:
Location/Address:	Approx. 1 st Inspection Date:
City, Province:	Approx. Completion Date:
Postal Code:	Contract Amount:

Painting Contractor

Company:	Contact Name:
Address:	Phone:
City, Prov:	Fax:
Postal Code:	E-mail:

General Contractor

Company:	Contact Name:
Address:	Phone:
City, Prov:	Fax:
Postal Code:	E-mail:

Architect

Company:	Contact Name:
Address:	Phone:
City, Prov:	Fax:
Postal Code:	E-mail:

Owner

Company:	Contact Name:
Address:	Phone:
City, Prov:	Fax:
Postal Code:	E-mail:

CONDITIONS:

- Membership must be paid and in good standing *prior to closing of tender* in order to qualify for the member rate.
- See payment rates and notes on Page 2: Payment Authorization

To be completed by APCA:	<input type="checkbox"/> Membership is in good standing.	<input type="checkbox"/> Non-Member/Independent
	<input type="checkbox"/> Full (or initial 50%) APCA fee has been received.	\$ _____
	<input type="checkbox"/> Final 50% has been received.	\$ _____
Assigned Inspection Agency _____	Approved _____	
A copy showing name of assigned Inspection Agency will be returned to you. Job # _____		



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PAYMENT AUTHORIZATION (Page 2 of 2)

PROJECT NAME: _____ **CONTRACT AMOUNT:** _____

✓	Contract Price	APCA Member Fees (plus GST)	Notes
	Up to \$16,000	<input type="checkbox"/> \$500 Minimum or <input type="checkbox"/> 5% of Contract Amount (whichever is higher)	<ul style="list-style-type: none"> Includes 1 inspection Payment due in full upon submission of this form.
	\$16,001 to \$50,000	\$800.00 Base Fee (A) + 4% (B) of contract amount less \$16,000 (C)	<ul style="list-style-type: none"> Includes up to 10 inspection hours Payment due in full upon submission of this form.
	\$50,001 to \$100,000	\$2,000.00 Base Fee (A) + 4% (B) of contract amount less \$50,000 (C)	<ul style="list-style-type: none"> Includes up to 16 inspection hours Payment due in full upon submission of this form.
	\$100,001 to \$300,000	\$4,200.00 Base Fee (A) + 2% (B) of contract amount less \$100,000 (C)	<ul style="list-style-type: none"> Includes up to 36 inspection hours Payment due in full upon submission of this form.
	\$300,001 to \$500,000	\$7,000.00 Base Fee (A) + 1.5% (B) of contract amount less \$300,000 (C)	<ul style="list-style-type: none"> Includes up to 44 inspection hours 50% of payment due upon submission of this form. 50% remaining balance due in 45 days.
	\$500,001 to \$750,000	\$9,000.00 Base Fee (A) + 1.5% (B) of contract amount less \$500,000 (C)	<ul style="list-style-type: none"> Includes up to 60 inspection hours 50% of payment due upon submission of this form. Balance due 45 days and/or before final report will be issued.
	\$750,001 and up	1.5% of contract fee	
✓	Item	Non-Member Fees	Specification consulting may be available for an extra fee . Contact the office for a quote.
	Independent Inspections	\$150/hour, minimum 4 hours	
	Spec Reviewing/Writing	\$150/hour	
✓	Travel Expenses (outside of Calgary/Edmonton)		
	Mileage	\$0.55/km	
	Accommodations	\$200.00/night maximum	
	Meals	\$85.00/day maximum	

Using the table above, locate the range in which the contract amount falls. Insert the appropriate value in the table below:

Contract Amount:	Base Fee (A):
Subtract Amount (C):	Add Amount (D):
Equals:	Other Amounts:
X _____ % (B):	Sub-total:
Sub-Total (D):	GST (x 5%):
	Total Fees:

- Cheque enclosed in the amount of \$ _____ made payable to APCA
- Charge to my credit card: Visa Mastercard American Express

Name on card (Print) _____ Signature* _____

Card number _____ Expiry Date _____

The undersigned contractor or firm agrees to pay the Alberta Painting Contractors Association the inspection fee on the contract price shown above, plus applicable taxes, for the services to be rendered by the inspection agency assigned.

Further, that the total contract price will be adjusted to reflect any additions at date of substantial performance.

Dated _____ Signed* _____ ***Please sign before faxing to APCA office**