

"AS IS" Form for Buyer

| Date: | |
|----------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| I, | am purchasing the property located at |
| property, I am assuming | "AS IS." I understand that as the new owner of the new owner of the responsibility for obtaining the City of Collinsville's Occupance all requirements as established in ordinance #18-49. |
| <u> </u> | pancy may take place until an inspection has been performed and in here are no known life safety hazards. |
| I agree to schedule an ins time I agree to request an | ection within 2 days of submitting this form . If I require additional extension in writing. |
| Property is/will be:Owr | er OccupiedTenant OccupiedUnknown |
| Printed Name | |
| Mailing Address | |
| City, State, Zip | |
| Phone Number | |
| Signature | |
| State of Illinois County of St. Clair | |
| This signature was acknow | edged before me on |
| Notary Public | |