



REQUEST FOR SURVEY

TO: Foit-Albert Associates
Survey Department
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Buffalo, New York 14203-1395

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MPohl@Foit-Albert.com

FROM: NAME:
ADDRESS:

TEL:
FAX:
EMAIL:

PLEASE DO A [ ] SURVEY AND MAP
[ ] STAKING
[ ] OTHER

YOUR FILE NO.: CLIENT NAME:

PROPERTY ADDRESS:

VILLAGE/CITY/TOWN:

SBL#: (DEED) LIBER AT PAGE

DATE SURVEY REQD: TENTATIVE CLOSING DATE:

CERTIFY TO:

ENCLOSED ARE: [ ] OLD SURVEY [ ] TAX RECEIPT [ ] DEED
[ ] LEGAL DESCRIPTION [ ] OTHER

SPECIAL INSTRUCTIONS:

SEND 3 PRINTS TO:

SEND 1 PRINT TO THIS OFFICE WITH INVOICE.

SIGNATURE

DATE