

**AGREEMENT FOR FURTHER SAMPLING**

**Mold Screen Results:** Based upon the results of the Mold Screen, We recommend that additional samples be taken in the Subject Property. A checked box indicates the condition(s) warranting this recommendation below. You will be provided information within the written Mold Screen Report identifying the areas of the Subject Property where microbial problems or conditions indicating microbial problems were discovered. This Agreement is not intended to be a substitute or replacement for the visual inspection. Any and all additional samples will be sent to an ESA approved Lab that will analyze them for the presence of mold. All sample results will be included in the Mold Screen Report defined in the Mold Screen Inspection Agreement.

- Evidence of suspected mold growth is visible in one or more areas of the property. It is recommended that swab samples in these areas be taken and tested.
- A visible condition exists in the Subject Property that may indicate that water infiltration has occurred or is occurring. Although there may be no visible signs of mold growth, this condition is conducive to mold growth that could be present in areas not readily visible. The tests recommended are: indoor air sampling, which will identify the type(s) of mold present, if any, and the concentrations of mold spores; a carpet test which will give "historical" data; and/or an inner wall sampling.
- A musty odor is present at the property. Although there may not be any physical evidence of the presence of mold growth in any readily accessible areas, this odor is consistent with odors commonly associated with the presence of mold growth. An indoor air sample; a carpet test which will give "historical" data; and/or an inner wall sampling is recommended.

Based on the above-checked items, the Client agrees to have the following samples taken in the home, as indicated by Your initials.

Location of Area to Be Sampled*	Type of Sample	Quantity	Price	Total	Initials
	Air / Swab / Carpet / Wall		@ \$	= \$	
	Air / Swab / Carpet / Wall		@ \$	= \$	
	Air / Swab / Carpet / Wall		@ \$	= \$	
	Air / Swab / Carpet / Wall		@ \$	= \$	
	Air / Swab / Carpet / Wall		@ \$	= \$	

\*We recommend sampling each of the areas identified in the Mold Screen Report having evidence of microbial problems (or conditions conducive thereto). Whether and which additional samples are taken is in the sole discretion of the Client.

Clients authorize and request the Inspector to take the samples initialed above. Clients understand that by requesting further sampling that this Agreement For Further Sampling becomes an additional addendum to the Mold Screen Agreement and subject to the terms thereof. Clients further acknowledge and agree that the Inspector may notify the homeowner or occupants of the Subject Property (if other than me/us) of any conditions in the Subject Property that may pose a health or safety concern."

\_\_\_\_\_  
Authorized Signature (Buyer)

\_\_\_\_\_  
Date

The undersigned Client(s), acknowledge that Client(s) have been advised and encouraged to have the Subject Property tested for mold, and that client(s) understand that the presence of certain types of mold prevalent in housing can pose severe health hazards. Client(s) **decline** that the Inspector conduct the services recommended above. Client(s) agree to hold harmless the Inspector for any damages or responsibility for building conditions which remain undiscovered regarding the discovery of mold and mold spores."

\_\_\_\_\_  
Authorized Signature (Buyer)

\_\_\_\_\_  
Date

**Fees.** The base fee for this Mold Screen Inspection is \$ \_\_\_\_\_ + Additional Samples @ \$ \_\_\_\_\_ (See above table for details) Total Fee \$ \_\_\_\_\_

THIS INSPECTION, INSPECTION AGREEMENT AND REPORT DO NOT CONSTITUTE A WARRANTY, AN INSURANCE POLICY, OR A GUARANTEE OF ANY KIND; NOR DO THEY SUBSTITUTE FOR ANY DISCLOSURE STATEMENT AS MAY BE REQUIRED BY LAW. By signing below, You acknowledge that You have read, understand, and agree to the terms and conditions of this agreement, including (but not limited to) the limitation of liability, arbitration clause and limitation period, and agree to pay the fee listed in the shaded box above. In addition, You acknowledge and agree that the Inspector may notify the homeowner or occupants of the Subject Property (if other than You), as well as any appropriate public agency, of any condition(s) discovered that may pose a safety or health concern.

Client Name \_\_\_\_\_

Property Address \_\_\_\_\_

Street Name

City

State

Zip

CLIENT

INSPECTOR

\_\_\_\_\_  
Client's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Company Name:  
Title:

\_\_\_\_\_  
Date