



**HOUSING INSPECTION DEPARTMENT
40 SEVERANCE CIRCLE
CLEVELAND HEIGHTS, OHIO 44118
(216) 291-5900
(216) 291-4881 (fax)**

ACKNOWLEDGMENT FORM

The **purchaser(s)** of the property located at _____ Cleveland Heights, Ohio, do hereby acknowledge receipt of a copy of the Certificate of Inspection issued by the Manager of the Housing Inspection Department within one (1) year of the initial inspection.

I/We understand and acknowledge the following:

- This signed acknowledgment form must be deposited in escrow and a copy provided to the Housing Inspection department as a condition of transfer of title.
- If all Class "A" violations listed on the Certificate of Inspection are not corrected prior to transfer of title, an escrow account must be established and funds equal to 125% of the estimated cost of repairs must be deposited to pay for the cost to correct all remaining Class "A" violations.
- The purchaser is responsible for correcting all violations remaining at transfer of title within ninety (90) days, unless an extension of time is approved by the Housing Inspection Department.
- The purpose of the inspection is to benefit the community at large and is not intended to protect the interests of any individual, owner, successor owner or occupant of the property. The City assumes no liability or responsibility for failure to report violations that may exist and does not warrant the repairs made pursuant to the inspection.

Name _____
(PLEASE PRINT)

Managing Member Name (if to be listed in company name) _____

Present Address: _____
(No Post Office Box)

Telephone Number: _____

Date: _____ Signature: _____

(Print Name) _____

Please note if this property will be owner-occupied. Yes ☐ No ☐

