



Request for Lumber/Timber Inspection Service

Company Information

Company Name: _____

Mailing Address: _____
Street or P.O. Box City State Zip

Billing Address: _____
Street or P.O. Box City State Zip

Physical Address: _____
(For Stamping Service) Street City State Zip

Business Phone: _____ **Email:** _____

Primary Contact: _____ **Title:** _____

Inspection Service Request Information

Lumber / Timber Sizes (thickness x width x length)	Species	Quantity (Pieces)	Lumber / Timber Sizes (thickness x width x length)	Species	Quantity (Pieces)

Use additional forms to list more items

Estimated Date Material is Ready for Inspection: _____

Type of Stamping Required (Hammerbranding and/or Certificate or Ink-Stamped): _____

Targeted Lumber/Timber Grades for Material (No.2, No.1, etc.): _____

Stamping Service Requested by: _____
(Print Name)

(Signature) _____ (Date)

NELMA Office Use ONLY

Service Request Received: _____ Request for Service Form Sent: _____

Completed Service Form Received: _____ Official Approval (Date & Initials): _____

Inspector Assigned & Date Notified: _____

Certificate #: _____

Return Completed Request to NELMA
Fax (207-829-4293) or Scan / Email to (info@nelma.org)