

## **COUNTY OF POLK**Public Works Department

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## Time of Transfer (TOT) Inspection Review Coversheet

This coversheet must be comple	eted and accompany	all lowa DN	R TOT inspection for	rms.
Address of Property:	City:	Zip:		_
Property Owner/Seller:	Emai	l: Zip:	Phone:	_
Seller Real Estate Agent: Phone:				
Buyer: Address: Phone:	City:	Email: Z	ip:	
Buyer Real Estate Agent: Phone:	Email:			
If a Real Estate Agent(s) is not in	nvolved, enter "N/A".			
Polk County will only accept cov	ersheets and Iowa D	NR inspecti	on forms by email.	
Email to: totinspection.review@	polkcountyiowa.gov			

Air Quality Building Inspection Development Services Engineering

Planning Secondary Roads Utilities Weed Commission Weatherization