

NAME		STREET		CITY		STATE		ZIP		DATE		ENVIRONMENTAL CHECK LIST		WORK PERFORMED	
						8014 JEFFREY ST.		HOUSTON TX		7/1/88		WORK PERFORMED		CONDENSING UNIT	
						77024						CLEANED CONDENSER COILS		CLEANED REFRIG. DRAIN	
						CALL BEFORE		A.M.				CHECKED FAN MOTOR		REPAIRED FAN MOTOR	
						AUTHORIZED BY		P.M.				REPAIRED LEAK IN COIL		REPAIRED PAN DRAIN	
						TECHNICIAN		ADRIAN F.				REPAIRED LEAK IN COVER		FURN. OR FAN COIL	
						WORK TO BE PERFORMED		CHECK A/C				# REF		REPLACED BELT	
												CHECKED MOTOR		REPLACED BELT	
												CHECKED MOTOR		REPLACED PULLEY	
												REPLACED BELT		ADJUSTED PULLEY	
												ADJUSTED BELT		CLEANED BLUENET	
												REPLACED BELT		REPLACED VALVE	
												HORN START RELAY		TEST MOTOR	
												REFL. START CAPACITOR		TEST BEARING	
												REPLACED RUN CAPACITOR		CLEANED HEAT EXCH.	
												CLEANED DR. COIL CAPACITOR		REPLACED HEAT EXCH.	
												REPLACED FUSE		CLEANED DR. ALL PIPES	
												REPLACED COMPRESSOR		REPAIR VALVE	
												EVAPORATOR COIL		REPLACED VALVE	
												REPLACED EXP. VALVE		CLEANED BURNERS	
												ADJUSTED EXP. VALVE		DUCT	
												REPLACED CAP TUBE		REPAIR	
												CLEANED CAP TUBE		ADJUSTED	
												REPLACED CAP TUBE		THERMOSTAT	
												REPLACED COMPRESSOR		REPLACED	
												CLEANED COIL		ADJUSTED	
												LEAKAGE COR.		CLB TOWER	
												ELECTR. HTR.		CLEANED	
												REPLACED LUM.		PUMP(S)	
												REPLACED RUA.		SPRINGS	
												REPAIRED WIRE		REPAIRED	
												REPLACED CONT.		REPAIRED	
												FILTERS		CLEANED / REPLACES	
												TOTAL SUMMARY			
												TOTAL MATERIALS			
												TOTAL LABOR			
												TRAVEL CHARGE			
												TAX			
												TOTAL		\$500.00	
												LIMITED WARRANTY:			
												All materials, parts and equipment are warranted by the manufacturers' or suppliers' written warranty only. All labor performed by the above named company is warranted for 30 days or as otherwise indicated in writing. The above named company makes no other warranties, express or implied, and its agents or technicians are not authorized to make any such warranties on behalf of above named company.			
												<input checked="" type="checkbox"/> REGULAR		<input type="checkbox"/> WARRANTY	
												<input type="checkbox"/> SERVICE CONTRACT			
												Thank You			

STUART'S PEST CONTROL, INC.

700 College • South Houston, Texas 77587-4200 • (713) 944-2347 • www.stuartspestcontrolinc.com • SPCH-TYCL #304

SUBTERRANEAN TERMITE POST-CONSTRUCTION TREATMENT DISCLOSURE FOR EACH ESTIMATE

Customer Name: Allen Harper
Address: 8019 Jellery
City: Houston State: Texas Zip: 77028

A payment of \$ 257.75
is due at time of services.

Licensed and Regulated by Texas Department of Agriculture • P.O. Box 12847 • Austin, Texas 78711-2847 • Phone (800) 916-4481 • (Fax) 888-232-2567 • www.tdsagriculture.gov

When an estimate or proposal for termite treatment is submitted to a consumer the pest control company must provide the following written disclosure information. For all treatments there will be a diagram showing exactly what will be treated. Treatment specifications and warranties for these treatments may vary widely. Review the pesticide label provided to you for minimum treatment specification. If you have any questions, contact the pest control company or the Texas Department of Agriculture, P.O. Box 12847, Austin, Texas 78711-2847. Telephone number (800) 916-4481 or fax 888-232-2567. Documentation shall also include but is not limited to approximate perimeter measurement of the structure, areas of active or previous termite activity, the concentration of any liquid termiticide application to be used or the minimum number of baiting systems installed or the square footage of a barrier is installed. The consumer is advised to review all this information and the pesticide label for explanations of the proposed treatment and compare this with any other proposal or estimate they may receive.

DEFINITIONS OF TREATMENT

A subterranean termite treatment may be a partial treatment or a spot treatment using termiticide, approved physical barriers or a baiting system. These types of treatments are defined as follows:

PARTIAL TREATMENT

This technique allows a wide variety of treatment strategies but is more involved than a spot treatment. (See definition below.) Ex. treatment of some or all of the perimeter, both inside, expansion joints, storm cracks, portions of framing, walls and bait locations.

Pier and Beam: Generally defined as the treatment of the outer perimeter including porches, patios and treatment of the attached garage. In the crawl space, treatment would include any soil to structure contacts as well as removal of any wood debris on the ground.

Slab Construction: Generally defined as treatment of the perimeter and all known slab penetrations as well as any known expansion joints or stress cracks.

SPOT TREATMENT

Any treatment which concerns a limited, defined area less than ten (10) linear or square feet that is intended to protect a specific location or "spot." Often there are adjacent areas susceptible to termite

infestation, which are not treated.

BAITING SYSTEM

This type of treatment may include interior and/or perimeter placement of monitoring or baiting systems along with routine inspection intervals. The baiting technique may include one or more baiting locations as prescribed by the product label and instructions.

BARRIERS

If a physical device is used, the square footage of the physical device must be recorded and a diagram describing the installation will be provided.

WARRANTY information provided includes the complete details any warranty provided and the following:

• Time Period of the Warranty: 5 years from treatment date

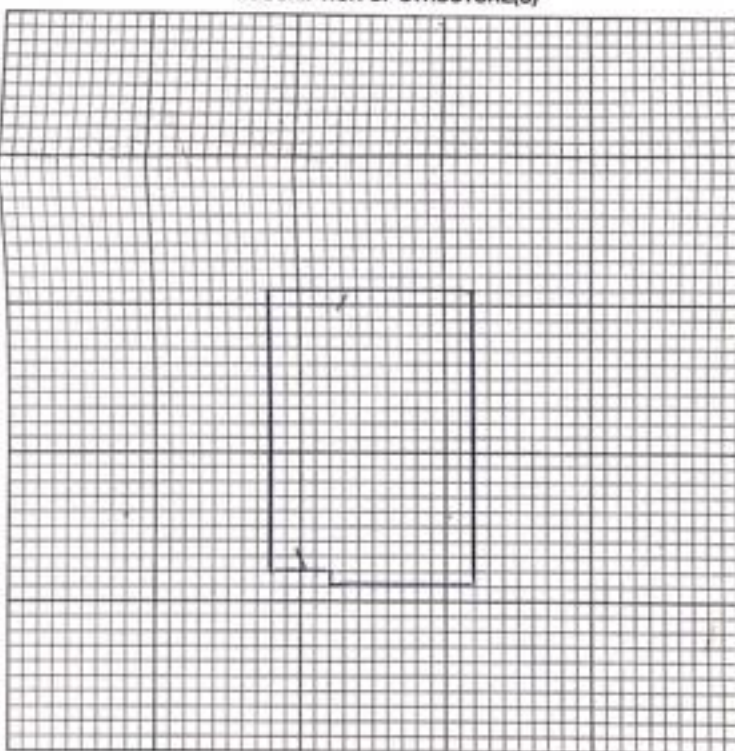
• Renewal Options and Cost: None

• Obligations of the Contracting Parties: Warranty is for treatment only

If the warranty does not include the entire structure treated, the areas included in the warranty are shown on the graph below.

A copy of the consumer information sheet has been made available to the appropriate party.

DESCRIPTION OF STRUCTURE(S)



TREATMENT METHOD

Partial

CHEMICAL USED

• A label of Termidor SC

IS ENCLOSED

CHEMICAL AMOUNT AND CONCENTRATION

• The concentration of any chemical to be applied at this location is

80 Gallons at .06%h

TARGET PEST

Subterranean/Retreat Termite

LOCATION

• Areas of present termite activity

Previous

(Use the following symbols on the diagram of the structure:

• (Existing) • (Active)
• (Previous) • Subterranean Termite
• Formosan Termite
• Condores Conditions)

• Areas to be treated, drilled, rodged, treated or baited (Example: Use an "X" for drilled, "W" for treated, "W" for rodged, "WB" for bait stations, and "WB" for barriers)

• Type of Construction, Type of Treatment (check all that apply)
Type of Treatment

☒ Pier & Beam
☒ Partial ☐ Bait
☐ Physical Barrier (Refer to Definition of Treatment)
☐ Slab ☐ Spot
☐ Other (specify)

• Approximate measurements of the structure(s) to be treated

90'

☐ Area under deck is inaccessible

TREATMENT NOTES

R.P. Tafelmeyer 0586035
SIGNATURE OF LICENSED APPLICATOR OR TECHNICIAN COMPLETING ESTIMATE

R.P. Tafelmeyer
PRINTED NAME

0586035
TECHNICIAN LICENSE #

8/14/18
DATE