TEXAS OFFICIAL WOOD DESTROYING INSECT REPORT

Rule §7.176 Requires this department prescribed form to be used for real estate transactions in Texas regarding the visible presence or absence of wood destroying insects and conditions conducive to infestations of wood destroying insects.

2506 Sand Bar Ct	Seabrook	77586
Inspected Address	City	Zip Code

SCOPE OF INSPECTION

- A. This inspection covers only the multi-family structure, primary dwelling or place of business. Sheds, detached garages, lean-tos, fences, guest houses or any other structure will not be included in this inspection report unless specifically noted in Section 5 of this report.
- B. This inspection is limited to those parts of the structure(s) that are visible and accessible at the time of the inspection. Examples of inaccessible areas include but are not limited to (1) areas concealed by wall coverings, furniture, equipment and stored articles and (2) any portion of the structure in which inspection would necessitate removing or defacing any part of the structure(s) (including the surface appearance of the structure). Inspection does not cover any condition or damage which was not visible in or on the structure(s) at time of inspection but which may be revealed in the course of repair or replacement work.
- C. Due to the characteristics and behavior of various wood destroying insects, it may not always be possible to determine the presence of infestation without defacing or removing parts of the structure being inspected. Previous damage to trim, wall surface, etc., is frequently repaired prior to the inspection with putty, spackling, tape or other decorative devices. Damage that has been concealed or repaired may not be visible except by defacing the surface appearance. The WDI inspecting company cannot guarantee or determine that work performed by a previous pest control company, as indicated by visual evidence of previous treatment; has rendered the pest(s) inactive.
- D. If visible evidence of active or previous infestation of listed wood destroying insects is reported, it should be assumed that some degree of damage is present.
- E. If visible evidence is reported, it does not imply that damage should be repaired or replaced. Inspectors of the inspection company usually are not engineers or builders qualified to give an opinion regarding the degree of structural damage. Evaluation of damage and any corrective action should be performed by a qualified expert.
- F. THIS IS NOT A STRUCTURAL DAMAGE REPORT OR A WARRANTY AS TO THE ABSENCE OF WOOD DESTROYING INSECTS.
- G. If termite treatment (including pesticides, baits or other methods) has been recommended, the treating company must provide a diagram of the structure(s) inspected and proposed for treatment, label of pesticides to be used and complete details of warranty (if any). The warranty should specify which areas of the structure(s) are covered by warranty, renewal options and approval by a certified applicator in the termite category. Information regarding treatment and any warranties should be provided by the party contracting for such services to any prospective buyers of the property. The inspecting company has no duty to provide such information to any person other than the contracting party.
- H. There are a variety of termite control options offered by pest control companies. These options will vary in cost, efficacy, areas treated, warranties, treatment techniques and renewal options.
- I. There are some specific guidelines as to when it is appropriate for corrective treatment to be recommended. Corrective treatment may only be recommended if (1) there is visible evidence of an active infestation in or on the structure, (2) there is visible evidence of a previous infestation with no evidence of a prior treatment.
- J. If treatment is recommended based solely on the presence of conducive conditions, a preventive treatment or correction of conducive conditions may be recommended. The buyer and seller should be aware that there may be a variety of different strategies to correct the conducive condition(s). These corrective measures can vary greatly in cost and effectiveness and may or may not require the services of a licensed pest control operator. There may be instances where the inspector will recommend correction of the conducive conditions by either mechanical alteration or cultural changes. Mechanical alteration may be in some instances the most economical method to correct conducive conditions. If this inspection report recommends any type of treatment and you have any questions about this, you may contact the inspector involved, another licensed pest control operator for a second opinion, and/or the Structural Pest Control Service of the Texas Department of Agriculture.

2506 Sand Bar Ct		<u>Seabroo</u>	ok .			77586	
Inspected Address		City				Zip Cod	de
1A. Green Team Pest	1B			0	759610		
Name of Inspection Company				SPCS Business Li	icense Number		
1C. 105 E Spreading Oaks Ave Ste 100 Address of Inspection Company	O Fries	ndswood		TX State	7754 Zip	,	(281) 295-1633 phone No.
, , ,	City				•	TCIC	priorie No.
D. Matthew Enright Name of Inspector (Please Print)				ertified Applicator echnician	r	[] (che	ck one)
	1F.	tion Data		04/18/	/2020		
	ins	pection Date	Collor IVI A	gont [] Dinion [[] Managamant	· Co. [] Othor	e []
<u>Jeremy Ellison</u> Name of Person Purchasing Inspect	tion		Seller [A] A	gent [] Buyer [.] Management	.co. [] Otner	L J <u>N/A</u>
. Owner of Record Owner/Seller							
REPORT FORWARDED TO: Title Company. (Under the Structural Pest Control			Seller s required to re		gent []	Buyer []	
The structure(s) listed below were inspected in the structure in the structure in the structure is made subject to the conditions.							ral Pest Control Servi
A. Residence		.,			,		
_ist structure(s) inspected that may include re	esidence, detached garages	and other structur	es on the prop	erty. (Refer to Par	rt A, Scope of Ins	pection)	
B. Type of Construction:							
Foundation: Slab [X] Pier & Beam [] _ Siding: Wood [] Hardie Plank [X]	N/A E	Rasement [] Other []	er []N/A	N/A	_		
Roof: Composition [X] Wood Shing							
A.This company has treated or is treating the treating for subterranean termites, the treat		gwood destroying in	nsects: <u>N</u> Spot	<mark>I/A</mark> [] Bait	[]	Other	[]
treating for drywood termites or related inst			Limited	[]	1.1	Other	
B. N/A			N/A			N//	Δ
Date of Treatment by Inspecting Co	mpany	Common I	Name of Insec	t	Name of P		r Other Method
his company has a contract or warranty in e	ffect for control of the follo	wing wood destroy	ing insects:				
Yes [] No [If "Yes", copy(ies) of warranty an	[X] List Insects: nd treatment diagram mu	N/A st be attached.					
either I nor the company for which I am acti	J		aving any inte	rest in the purcha	se or sale of this	property. I do f	further state that nei
nor the company for which I am acting is ass	ociated in any way with any	party to this real e	state transacti	on.			
ignatures:							
	Name and License Number	'					
nspector (Tecnnician or Certified Applicator Nature of theirs Present:		,					
nspector (Tecnnician or Certified Applicator Nothers Present: B. <u>Eric DeLeon #</u>	#0616571		r(s)				
nspector (Tecnnician or Certified Applicator N Others Present: 7B. <u>Eric DeLeon #</u> Apprentices, Technicians, or Certified Applica	#0616571		r(s)				
nspector (Tecnnician or Certified Applicator Nothers Present: PB. <u>Eric DeLeon #</u> Apprentices, Technicians, or Certified Application Notice of Inspection Was Posted At or Near:	#0616571 Itors Name(s) and Registrati	on/License Numbe					
nspector (Tecnnician or Certified Applicator Nothers Present: 7B. <u>Eric DeLeon #</u> Apprentices, Technicians, or Certified Applications Notice of Inspection Was Posted At or Near: A. Electric Breaker Box Water Heater Closet	#0616571 utors Name(s) and Registrati	on/License Numbe	r(s) 04/18/2020				
nspector (Tecnnician or Certified Applicator Nothers Present: 1/8.	#0616571 Itors Name(s) and Registrati	on/License Numbe					
nspector (Tecnnician or Certified Applicator Nothers Present: 7B. Eric DeLeon # Apprentices, Technicians, or Certified Application Notice of Inspection Was Posted At or Near: A. Electric Breaker Box Water Heater Closet Beneath the Kitchen Sink A. Were any areas of the property obstructed	#0616571 Itors Name(s) and Registrati [] 8B. Date [] [X]	on/License Numbe		No	[]		
nspector (Tecnnician or Certified Applicator Nothers Present: 78.	#0616571 Ittors Name(s) and Registrati [] 8B. Date [] [X] d or inaccessible? es" specify in 9B.	on/License Numbe e Posted: Yes	04/18/2020	No	[]		
nspector (Tecnnician or Certified Applicator Nothers Present: "B. <u>Eric DeLeon #</u> Apprentices, Technicians, or Certified Application of Inspection Was Posted At or Near: A. Electric Breaker Box Water Heater Closet Beneath the Kitchen Sink A.Were any areas of the property obstructed Refer to Part B & C, Scope of Inspection) If "Yes. B.The obstructed or inaccessible areas includant	#0616571 Itors Name(s) and Registration [] 8B. Date [] [X] d or inaccessible? es" specify in 9B. de buy are not limited to the insulated area of attic [X]	on/License Numbe e Posted: Yes e following: Plumbing A	04/18/2020 [X] [X] streas [X]	Planter b	oox abutting struc		
nspector (Tecnnician or Certified Applicator Nothers Present: B. Eric DeLeon # Apprentices, Technicians, or Certified Application of Inspection Was Posted At or Near: A. Electric Breaker Box Water Heater Closet Beneath the Kitchen Sink A.Were any areas of the property obstructed Refer to Part B & C, Scope of Inspection) If "Yes B.The obstructed or inaccessible areas includant in the Company of Inspection of Inspecti	#0616571 Ittors Name(s) and Registrati [] 8B. Date [] [X] d or inaccessible? es" specify in 9B. de buy are not limited to th	on/License Numbe e Posted: Yes e following:	04/18/2020 [X]	Planter b Crawl Spa	oox abutting struc ace	cture []	
nspector (Tecnnician or Certified Applicator Nothers Present: B. Fric DeLeon # pprentices, Technicians, or Certified Application otice of Inspection Was Posted At or Near: A. Electric Breaker Box Water Heater Closet Beneath the Kitchen Sink A.Were any areas of the property obstructed defer to Part B & C, Scope of Inspection) If "Year Back of the Deck of Inspection of Inspect	#0616571 Itors Name(s) and Registration [] 8B. Date [] [X] It does not limited to the normal area of attic [X] It debug are normal area of attic [X] It debug area of attic [X] It debug are normal area of attic [X] It debug area of attic [X] It debug are normal area of attic [X] It debug area of attic [X] It debug are normal area of attic [X] It debug are normal area of attic [X] It debug area of attic [X] It debug are normal area of attic [X] It debug area of attic [X] It debug	on/License Numbe e Posted: Yes e following: Plumbing A Slab Joints Eaves	04/18/2020 [X] xreas [X] [X]	Planter b Crawl Spa Weephol	oox abutting struc ace les	[]	
nspector (Tecnnician or Certified Applicator Nothers Present: 7B. Eric DeLeon # Apprentices, Technicians, or Certified Application Notice of Inspection Was Posted At or Near: NA. Electric Breaker Box Water Heater Closet Beneath the Kitchen Sink NA.Were any areas of the property obstructed Refer to Part B & C, Scope of Inspection) If "Yes" Partic [] In Signification [] Significant [] Sign	#0616571 Itors Name(s) and Registration Reg	on/License Numbe e Posted: Yes e following: Plumbing A Slab Joints Eaves r Crack, Patio Bric	04/18/2020 [X] xreas [X] [X] (X) (X) (X) (X) (X) (X) (X) (Planter b Crawl Sp: Weephol cked areas of th	oox abutting struct ace les e attic	[]	
Inspector (Tecnnician or Certified Applicator Nothers Present: 7B. Eric DeLeon # Apprentices, Technicians, or Certified Application Notice of Inspection Was Posted At or Near: 8A. Electric Breaker Box Water Heater Closet Beneath the Kitchen Sink 9A.Were any areas of the property obstructed Refer to Part B & C, Scope of Inspection) If "Yester to Part B & C, Scope of Inspection of the property obstructed of the property o	#0616571 Itors Name(s) and Registration Reg	on/License Numbe e Posted: Yes e following: Plumbing A Slab Joints Eaves r Crack, Patio Bric Yes ontact (G)	(X) (X) (X) (X) (X) (X) (X) (X)	Planter b Crawl Sp. Weephol cked areas of th No	oox abutting struct ace les ne attic [] ace (I) [] Ex	[]	ure (J) []
Inspector (Tecnnician or Certified Applicator Nothers Present: 7B.	#0616571 Itors Name(s) and Registration Reg	on/License Numbe e Posted: Yes e following: Plumbing A Slab Joints Eaves r Crack, Patio Bric Yes ontact (G) soil line too high (L)	04/18/2020 [X] vreas [X] [X] ck/Tile, Un-de [X] [X] Forn [X] Woo	Planter b Crawl Sp: Weephol c <u>ked areas of th</u> No	oox abutting struct ace les le attic [] ace (I) [] Ex	[] [] xcessive Moistu eavy Foliage (N	ure (J) []

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and Bar Ct		Seabrook		775	86
ected Address		City			p Code
tion Reveals Visible Evidence in or erranean Termites	on the structure:	Active Infestati		vious Infestation [] No [X]	Previous Treatm
erranean Termites ood Termites		Yes [] No Yes [] No		[] No [X]	Yes [] No Yes [] No
osan Termites		Yes [] No	[X] Yes	[] No [X]	Yes [] No
enter Ants r Wood Destroying Insects				[] No [X] [] No [X]	Yes [] No Yes [] No
y: N/A					162 [] 140
nation of signs of previous treatm	ent (including pesticides, bai	ts, existing treatment stick	ers or other methods) id	entified:	
le evidence of:N	has been o	observed in the following a	reas: N/A		
visible evidence of active or previ			nust be listed in the first	blank and all identified i	nfested areas of the pro
must be noted in the second bla		•			
ective treatment recommended fon ection)		[] No [X]	with no prior treatment a	is identified in Section 1	i. (Reier to Part G, H, an
ventive treatment and/or correct	ion of conducive conditions a	s identified in 10A & 10B is	recommended as follov	vs: Yes [X] No	[]
reason: <u>Lower Soil (show 2</u> Scope of Inspection Part J	-3" of slab), -or- preventativ	<u>re treatment</u>			
ctor must draw a diagram includi	Diag	ram of Structure(s) Inspected	ation and type of incost	ny using the fellowing s
ctor must draw a diagram includi of Infestation, A-Active; P-Previou					
r Ants; Other(s) – Specify <u>N/A</u>					
			<u> </u>		
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	C/L				
	U/L				
Comments 2506 Sand Bar Ct,	Seabrook TX 77586. Drawii	ng not to scale.			

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2506 Sand Bar Ct	Sea	abrook	77586
Inspected Address	(ity	Zip Code
	Staten	nent of Purchaser	
I have received the original or a legible copy of	this form. I have read and understand	d any recommendations made. I	have also read and understand the "Scope of Inspection." I
		to this report.	have also read and understand the "Scope of Inspection." I
If additional information is attached, list number Signature of Purchaser of Property or their Des	er of pages: ignee	Date	
[] Customer or Designee Not present	Buyer's Initials		
[] customer of Designee Not present	Dayer 5 millions		
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