

# Certificate showing this property does not have mold damage

## Certificate of mold damage remediation

**Property owner:** Keep this certificate and give a copy to your insurance agent or company.

### Property owner and location

Property owner's name Jing Wu

Mailing address 201 Vanderpool Ln Unit 38 Houston, TX 77024

Property address 201 Vanderpool Ln Unit 38 Houston, TX 77024

Lot \_\_\_\_\_ Block \_\_\_\_\_ Addition or tract \_\_\_\_\_ County Harris

### Instructions

- **If mold damage has been treated (remediated):** Both Box A and B below must be filled out. The mold remediation contractor must fill out Box A. The mold assessment consultant must fill out Box B.
- **If no mold damage was found:** The mold assessment consultant or insurance adjuster must fill out Box C.

► **Mold damage has been treated** (If Box A and B are filled out, Box C does not need to be filled out.):

**Box A:** To be filled out by the mold remediation contractor.

I certify that:

- I treated the damage caused by mold at this property. Treatment can include removing, cleaning, sanitizing, and preventing mold damage.
- I gave this certificate to the property owner within 10 days after completing the work.

<b>Certificate number</b>	<b>Date issued</b>
Mold remediation contractor's signature	Date
Contractor's printed name and address	Date treatment completed
Texas Department of Licensing and Regulation license number	License expiration date

**Box B:** To be filled out by the mold assessment consultant.

I certify that:

- Damage caused by mold at this property has been treated (remediated).
- With reasonable certainty, the underlying causes of the mold have been treated so mold will not return.
- I gave a copy of my report to the property owner.

Per Occupations Code Section 1958.154: Based on visual, procedural, and analytical evaluation, the mold contamination identified for the project has been remediated as outlined in the mold management plan or remediation protocol.

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 Mold assessment consultant's signature

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 Date

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 Consultant's printed name and address

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 Texas Department of Licensing and Regulation license number

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 License expiration date

► **No mold damage was found** (If Box C is filled out, Box A and B do not need to be filled out.):

**Box C:** To be filled out by the mold assessment consultant or insurance adjuster.

I certify that:

- I inspected this property.
- I did not find signs (evidence) of any mold damage.
- I gave a copy of my report to the property owner.

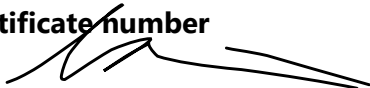
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10-29-2021

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**Certificate number**


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**Date issued**



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 10-29-2021

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 Mold assessment consultant or insurance adjuster's signature

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 Date

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 Hansel OHalloran, 6350 Richmond, Houston, TX 77057 Ste 110A

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 Consultant or adjuster's printed name and address

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 MAC1273

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 9-3-2023

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 Texas Department of Licensing and Regulation license number, or  
 Texas Department of Insurance license number

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 License expiration date