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.

217 11th Ave N	Texas City	77590
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.

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217 11th Ave N	Texas City		77590
Inspected Address	City		Zip Code
1A. GreenWorks Service Company	1B.	0761253	
Name of Inspection Company		SPCS Business License Num	ber
1C. 600 N. Pearl St., Suite S1900	Dallas	TX	75201 855-349-6757
Address of Inspection Company	City	State Z	ip Telephone No.
1D. Louis Montalvo - WDI	1E.	Certified Applicator	[X] (check one)
Name of Inspector (Please Print)		Technician	[]
	1F Inspection Date	08/07/2021	-
2. Robert Orfino	·	r [] Agent [] Duyer [V] Manag	oment Co. [1] Other [1]
Name of Person Purchasing Inspection		r [] Agent [] Buyer [X] Manag	ement Co. [] Other [] N/A
3. Unknown			
Owner/Seller 4.REPORT FORWARDED TO: Title Company or Mortgagee []	Purchaser of Service [X] Selle	er [] Agent []	Buyer []
(Under the Structural Pest Control regulations only th		9	24,6. []
The structure(s) listed below were inspected in assert ansa with	the official increasing procedures adopte	d buth a Tayar Danartment of Agricult	ura Structural Doct Control Consider
The structure(s) listed below were inspected in accordance with This report is made subject to the conditions listed under the Sco	the official inspection procedures adopte ope of Inspection. A diagram must be atta	d by the Texas Department of Agriculti ched including all structures inspected	
5A. Residence. Detached Garage Apartment			
List structure(s) inspected that may include residence, detached	d garages and other structures on the pro	perty. (Refer to Part A, Scope of Inspec	tion)
5B. Type of Construction:			
Foundation: Slab [X] Pier & Beam [X] Pier Type: Siding: Wood [X] Fiber Cement Board [] Brick [X]	Concrete & Wood Basement []		_ Metal []
Roof: Composition [X] Wood Shingle [] Metal []		Not Observed [] TPO [• • • • • • • • • • • • • • • • • • • •
6A.This company has treated or is treating the structure for the		N/A	
If treating for subterranean termites, the treatment was: [X] Unknown []	Partial [] Spot	[] Bait []	Other [] N/A
If treating for drywood termites or related insects, the treatment	t was: Full [] Limit	ed [] N/A [X]	
6B. N/A Date of Treatment by Inspecting Company	N/A Common Name of Insec	t Name of Postin	N/A ide, Bait or Other Method
This company has a contract or warranty in effect for control of t		t Marile of Festion	ide, Bait of Other Method
Yes [] No [X] List Ins			
If "Yes", copy(ies) of warranty and treatment diagr			
Neither I nor the company for which I am acting have had, prese company for which I am acting is associated in any way with any		erest in the purchase or sale of this pro	operty. I do further state that neither I nor the
Simulation A. A.	p = - 9		
Toring Youte low			
7A. TEMES POLITAGES	e Number)		
7A	e Number)		
7A	<u> </u>		
7A	<u> </u>		
7A	<u> </u>		
7A	Registration/License Number(s)		
7A. Inspector (Technician or Certified Applicator Name and License Others Present: 7B Apprentices, Technicians, or Certified Applicators Name(s) and Notice of Inspection Was Posted At or Near:	Registration/License Number(s)		
7A	Registration/License Number(s) 3. Date Posted: Yes [X]	No []	
7A. Inspector (Technician or Certified Applicator Name and License Others Present: 7B. Apprentices, Technicians, or Certified Applicators Name(s) and Notice of Inspection Was Posted At or Near: 8A. Electric Breaker Box [] 8B Water Heater Closet [] Beneath the Kitchen Sink [] 9A.Were any areas of the property obstructed or inaccessible? (Refer to Part B & C, Scope of Inspection) If "Yes" specify in 9B.	Registration/License Number(s) 3. Date Posted: Yes [X]		
7A	Registration/License Number(s) 3. Date Posted: Yes [X] ted to the following: attic [X] Plumbing Areas [X] [] Slab Joints [X]] Planter box abutting structu] Crawl Space	įΧj
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7A	Registration/License Number(s) 3. Date Posted: Yes [X] ted to the following: attic [X] Plumbing Areas [X] [] Slab Joints [X] [[X] Eaves [X] ering (tile), Inside Wall Cavities, Furnitue: Yes [X]] Planter box abutting structu] Crawl Space] Weepholes re/Storage No []	įΧj
7A	Registration/License Number(s) 3. Date Posted: Yes [X] ted to the following: attic [X] Plumbing Areas [X] [] Slab Joints [X] [[X] Eaves [X] ering (tile), Inside Wall Cavities, Furnitue: Yes [X]	Planter box abutting structu Crawl Space Weepholes re/Storage No [] ormboards left in place (I) [] Exc	įΧj
7A	Registration/License Number(s) 3. Date Posted: Yes [X] ted to the following: attic [X] Plumbing Areas [X] [1] Slab Joints [X] [X] Eaves [X] ering (tile), Inside Wall Cavities, Furnitus: Yes [X] Ground Contact (G) [1] Foollow or soil line too high (L) [X]	Planter box abutting structu Crawl Space Weepholes re/Storage No [] ormboards left in place (I) [] Exc Wo Wood Rot (M) [X] Struct	essive Moisture (J) [X] od Pile in Contact with ture (O) [1]
TA	Registration/License Number(s) 3. Date Posted: Yes [X] ted to the following: attic [X] Plumbing Areas [X] [] Slab Joints [X] [Eaves [X] Sering (tile), Inside Wall Cavities, Furnitus: Yes [X] Ground Contact (G) [] Food low or soil line too high (L) [X] Wood abutting structure (O) [] Wood and in the contact (G) [] Wood abutting structure (O) [] Wood abutting structure	Planter box abutting structu Crawl Space Weepholes re/Storage No [] ormboards left in place (I) [] Exc Wo Wood Rot (M) [X] Struct Wooden Fence in Contact with the Struct	essive Moisture (J) [X] od Pile in Contact with ture (O) [1]
TA	Registration/License Number(s) 3. Date Posted: Yes [X] ted to the following: attic [X] Plumbing Areas [X] [X] Slab Joints [X] [X] Eaves [X] ering (tile), Inside Wall Cavities, Furnitum [X] Ground Contact (G) [X] From the context of the conte	Planter box abutting structu Crawl Space Weepholes re/Storage No [] ormboards left in place (I) [] Exc Wo Wood Rot (M) [X] Struct	essive Moisture (J) [X] od Pile in Contact with ture (O) [1]

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217 11th Ave N			Texas City		77590
Inspected Address 11. Inspection Reveals Visible Evidence in or 11A.Subterranean Termites 11B.Drywood Termites 11C.Formosan Termites 11D.Carpenter Ants 11E.Other Wood Destroying Insects	on the structure:		City Active Infestation Yes [] No [X]	Previous Infestation Yes [] No [X]	Zip Code Previous Treatment Yes [] No [X]
Specify:	ent (including pe	sticides, baits, existing	g treatment stickers or other m	ethods) identified:	
N/A 11G. Visible evidence of:	I/A	has been observed	in the following areas: N/A		
If there is visible evidence of active or previous be noted in the second blank. (Refer to Part 12A. Corrective treatment recommended for Scope of Inspection) 12B. A preventive treatment and/or correct Specify reason: Wood Rot, High Soil. Refer to Scope of Inspection Part J	D, E & F, Scope of or active infestation ion of conducive c	Inspection) n or evidence of prev Yes [] onditions as identifie	ious infestation with no prior to No [X] d in 10A & 10B is recommende	reatment as identified in Section 11	fested areas of the property inspected must .(Refer to Part G, H, and I, No []
The inspector must draw a diagram includir Evidence of Infestation, A-Active; P-Previous Carpenter Ants; Other(s) – Specify	; D-Drywood Terr	erimeter measureme	m of Structure(s) Insp ents and indicate active or prev n Termites; F-Formosan Termit	vious infestation and type of insect l	oy using the following codes: E- d Boring Beetles; H-
		V	м	M	
				į J	
	V			35	
				J	
			60		
				J= Excessive moisture	
			th Ave N, Texas City, Tx onducive Area Map	L= Soil line too high M= Wood rot	
		N	45	N= Heavy foliage V= Vines on wall	
				v= vines on wall	
	40				
	N				
	:				
Additional Comments Any conducive co	nditions should	be corrected or hav	ve preventative treatment.		

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17 11th Ave N Inspected Address		Texas City	77590		
nspected Address		City	Zip Code		
		Statement of Purchaser			
re received the original or a legible copy of	his form. I have read and underst	orm. I have read and understand any recommendations made. I have also read and understand the "Scope of Inspecti al information as an addendum to this report.			
erstand that my inspector may provide additional information is attached, list numbe		um to this report.			
nature of Purchaser of Property or their Des		Date			
Customer or Designee Not present	Buyer's Initials				
eustamen en blesignee met present	24,0.0				

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