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BALLARD'S PROFESSIONAL PEST CONTROL

Helping Rid Pests Since 1985!

Larry Ballard has performed over **33,000** WDI Real Estate Inspections

Kingwood/Humble
281-358-BUGS

The Woodlands/Conroe/Coldspring/Cleveland
281-443-BUGS

North Houston/Spring
281-821-BUGS

Willis/Montgomery
832-888-BUGS

Mailing Address: P.O. BOX 5398 | KINGWOOD, TX 77325

SERVICE REPORT

BID

INVOICE

RECEIPT

Name/Seller/Buyer/Agent/

Kristine Hayden

Date:

1/17/2022

Address

675 County Rd 3141 E

Tech:

GREG #068869

City/Zip

Cleveland 77327

Home #

Internal:

E-mail

Cell #

832-469-5272

Rec'd By:

INSPECTED PREMISES AND/OR PERFORMED THE DUTIES NECESSARY FOR THE CONTROL OF:

- Int. Roach Service** **Quarterly Roach Service** **German Roach** **(Fire) Ant Treatment** **Exterior Only**
- Last Service* _____ *If services exceed 6 months your next appointment is considered an Initial Service
- Bid/Exclusion/Quote \$ _____ Exclusion On _____ # Hours Needed _____ _____ **Sq Ft**
- Fleas: Inside /Outside Spiders Wasp Mosquitos Silverfish Rodent OTHER _____
- Animal _____ Small Cage # of _____ Large Cage # of _____ Cage Pick-up: _____
- WDI _____ Re-Insp Re-treat Termite Renewal - Original date: _____
- Sub.Termite Treatment: Full Perimeter/Spot *Garage only* House and/or Garage Misc.: _____

If follow-ups are needed, Call or email our office to arrange your appointment * Keep Bait Boxes Away From Children and Pets *

Follow-up is needed for: EXTERIOR OTHER _____ \$ _____ NO follow-up needed

Treatment Includes _____ follow-ups; additional follow-ups are: \$ _____

TECHNICIAN COMMENTS: **Refer a friend, get \$5.00 off your next service.** *treated garage for termites and house for ants*

WARRANTIES ♦ Initial Roach Service- 30 days ♦ Flea Interior- 30 days ♦ German Roaches- 0 days ♦ Quarterly Roach- 90 days
 ♦ Termites- 1 year (optional 4-year extended warranty after 1st year) ♦ Spot 0 Days ♦ 180 Days Fire Ants (Top Choice treatment)
 ♦ 0 Days Spiders ♦ 0 Days Mosquitoes ♦ Warranty Fire ants Days # 0

CHEMICALS USED: (Approximate Measurement of Chemicals or Supplies that May Be Used) One guard _____ oz _____ gal _____

Alpine WSG _____ % _____ gal Advion _____ Gel _____ g. Bifen L&P _____ lbs. Conrac Blox _____ (Attic only) Rodent baiter _____

Cynoff EC _____ % _____ gal Cyper TC _____ % _____ gal Rat sorb _____ oz Suspend SC/ Polyzone _____ % _____ gal IBS _____

Phantom .25 % or .125 % _____ gal Protecta LP _____ Final Blox _____ Precor .007% _____ gal DSV _____ % _____ gal Profoam _____ % _____ gal

Cykick CS .05% or .10% _____ gal Talstar Pro 1.5 % _____ gal 960 Vector _____ Wasp Freeze _____ oz. Talpirid _____ Bait plate _____

Termidor HE or SC 0.06% or .09% 12 gal Alpine flea _____ oz./ can Niban / Niban FG _____ oz Zenprox .25 % _____ gal

Top Choice _____ Lbs Exciter _____ % _____ gal Archer IGR .01 % or .02 % _____ gal Demand CS _____ % _____ gal Altosid _____

Borid Dust _____ oz. P.I. _____ oz. Glue boards _____ T-Rex snap traps _____ Pheromone trap _____ Temprid FX.075% 1/2 gal.

Biferthin .06% _____ Onslaught fastcap .062% or .125% _____ gal Fendona CS .025% or .050% _____ gal

PAYMENT IS DUE WHEN SERVICES ARE RENDERED - Thank you for your business!!!

Sub Total: \$ 225.00 Cash \$ _____ Check # _____ Credit Card # _____ **\$3.00 service chg. added**

Tax: \$ 18.56 Zelle # RPO97XCSV (Ballard's Pest Control | 281.658.2996 | ballards2012@gmail.com)

CC STC: \$ 243.56 Venmo # _____ (@Ballards-pest-85 | 281.658.0906)

TOTAL: \$ +50.00 PC Customer Signature X [Signature]

293.56

Bid Packet/Dislosures/MSDS labels have been received or can be viewed on our website: www.BallardsPest.com

Licensed and Regulated By: Texas Department of Agriculture PO Box 12847, Austin, TX 78711-2847 Phone 866-918-4481 Fax 888-232-2567 Revised 11/21

SUBTERRANEAN TERMITE POST-CONSTRUCTION TREATMENT DISCLOSURE FOR EACH ESTIMATE

Licensed and regulated under the Texas Structural Pest Control Act, Texas Department of Agriculture, Structural Pest Control Service

PEST CONTROL COMPANY:

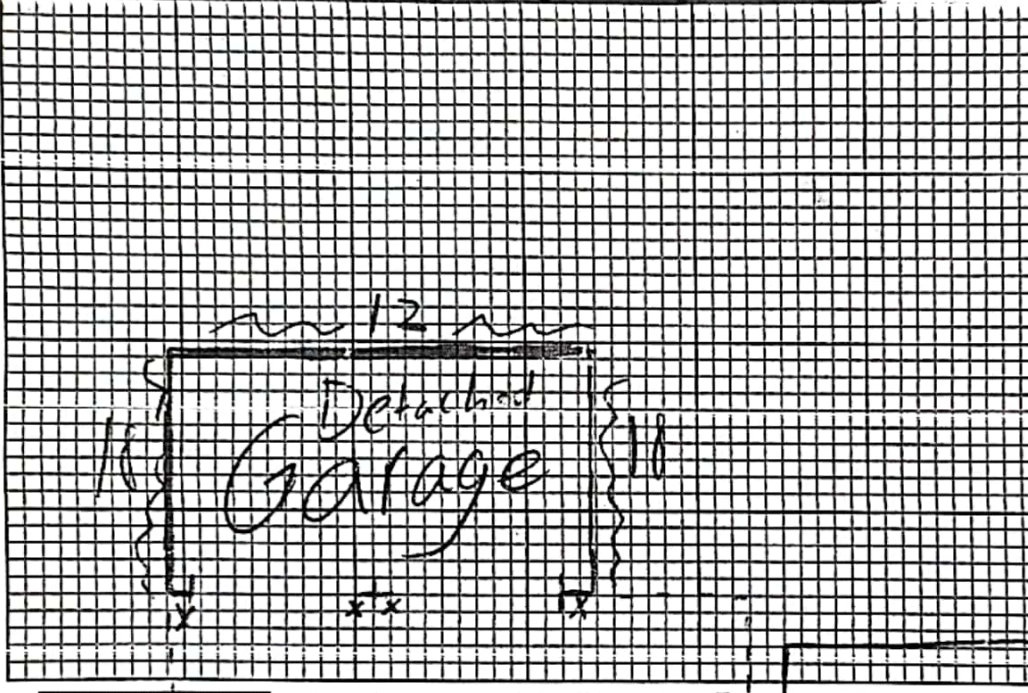
Name: **Ballard Professional Pest Control** SPCS Business License No. **6075** Phone#: **(281) 358-2847**
 Address: **P. O. Box 5398** City **Kingwood** State: **TX** Zip Code: **77325**

CUSTOMER INFORMATION:

Name: _____ Phone1#: _____ Phone2#: _____
 Address: **625 County Rd 2144E** City **Cleveland** State **TX** Zip Code **77327**

When an estimate or proposal for termite treatment is submitted to a consumer the pest control company must provide the following written disclosure information: a detailed diagram showing the areas to be treated, approximate perimeter measurement of the structure, and areas of active or previous termite activity, terms of the warranty or guarantee, product label, and the concentration of any liquid termiticide application to be used or the minimum number of baiting systems installed. Treatment specifications, warranties and guarantees can vary widely. The consumer is advised to review all this information and the product label for explanations of the proposed treatment and compare this with any other proposal or estimate they may receive. If you have any questions, contact us (see our phone number above) or the Texas Department of Agriculture, Structural Pest Control Service, P.O. Box 12847, Austin, Texas 78711-2847. Phone: (512) 305-8250 or 866-918-4481, Fax: 888-232-2567.

Diagram of Structure(s) and Proposed Area(s) To Be Treated



KEY TO DIAGRAM SYMBOLS

Conductive Condition for Termites	C
Evidence of Infestation	A
Evidence of Active Infestation	A
Evidence of Previous Infestation	P
Evidence of Subterranean Termites	S
Evidence of Formosan Termites	F
Evidence of Wood Boring Beetles	W
Area to be Drilled	X
Area to be Trenched	T
Area to be Rodded	R
Area to be Baited	B

Area of Present Termite Activity:
 See diagram or WDI

Location to be Treated:
 See diagram/Definition of treatment
 Garage ONLY

TYPE OF CONSTRUCTION:

FOUNDATION: <input checked="" type="checkbox"/> Slab <input type="checkbox"/> Pier and Beam Pier Type: _____ <input type="checkbox"/> Basement <input type="checkbox"/> Other: _____	SIDING: <input checked="" type="checkbox"/> Wood <input type="checkbox"/> Brick <input type="checkbox"/> Stone <input type="checkbox"/> Plaster <input type="checkbox"/> Other: _____	ROOF: <input checked="" type="checkbox"/> Composition <input type="checkbox"/> Wood Shingle <input type="checkbox"/> Metal <input type="checkbox"/> Tile <input type="checkbox"/> Other: _____	PRIMARY USE: <input type="checkbox"/> Residence <input type="checkbox"/> Public Building <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Other: <i>Garage/Storage</i>	INACCESSIBLE / OBSTRUCTED AREAS: <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
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PROPOSED TREATMENT SPECIFICATIONS:

Type of treatment proposed: Partial Spot Baits Physical Barrier Other(specify) _____ Approx. measurements of structure(s) to be treated: *12*
 A label of *Terminator H.R.* is attached. The concentration of the termiticide(s) to be applied is _____%. Approx. number of gallons _____

DEFINITIONS OF TREATMENT:

A subterranean termite treatment may be either a partial treatment or a spot treatment, involving the use of chemicals or physical barriers, or the treatment may include the use of a baiting system. These type 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, bath traps, expansion joints, stress 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 monitoring or baiting stations along the routine inspection intervals. The baiting technique may include one or more baiting locations as prescribed by the product label and instructions.

WARRANTY & ATTACHMENTS:

Warranty information (if any) including area covered, time period of warranty, renewal options and cost, the obligations of the contracting parties, and conditions that could develop which would void the warranty. Areas of warranty are areas of original treatment.

Signature of Certified Applicator or Technician Completing Estimate: *[Signature]* License #: *0687169* Date: *11/17/12*
 Signature of Customer Verifying Receipt of The Document: *[Signature]* Date: *11/17/12*