## 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.

21134 Stoney Haven Dr	Katy	77449
Inspected Address	City	Zip Code

- 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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Inspected Address	City		Zip Code		
1A. Green Team Pest	1B.		0759610		
Name of Inspection Company	·- <u>-</u>	SPCS Busine	ss License Number		
1C. 105 E Spreading Oaks Ave Ste 100	Friendswood	TX	77546 (2	281) 295-1633	
Address of Inspection Company	City	State	·	hone No.	
1D. <b>Jim Biles</b>		1E. Certified Applicat	or [] (check one)	)	
Name of Inspector (Please Print)	•	Technician	[X]	•	
	1F	03	3/26/2021		
	Inspection Date				
Zachary Lydon  Name of Person Purchasing Inspection		Seller [] Agent [] Buy	er [X] Management Co. [ ] Other [	[ ] <u>N/A</u>	
3. Owner of Record					
Owner of Record  Owner/Seller  4.REPORT FORWARDED TO: Title Company or Mortgagee [ ] Purchaser of Service [ ] Seller [ ] Agent [X] Buyer [X]  (Under the Structural Pest Control regulations only the purchaser of the service is required to receive a copy)					
The structure(s) listed below were inspected in accordance wi This report is made subject to the conditions listed under the	ith the official inspection procedure	s adopted by the Texas Departi	ment of Agriculture Structural Pest Cont	trol Service.	
	scope of mapeedom, talage ammas		ical estilispecical		
5A. Residence List structure(s) inspected that may include residence, detach	ned garages and other structures or	the property. (Refer to Part A.	Scope of Inspection)		
5B. Type of Construction:	ica garages arra sarer sa accar es or	. and property (meter to railer )	scope of map ecoon,		
Foundation: Slab [X] Pier & Beam [ ] Pier Type:		ent [] Other []	N/A		
Siding: Wood [X] Fiber Cement Board [X] Brick Roof: Composition [X] Wood Shingle [ ] Metal		N/A	<del>_</del>		
6A.This company has treated or is treating the structure for the	, ,				
If treating for subterranean termites, the treatment was:  If treating for drywood termites or related insects, the treatment	Partial [ ] ent was: Full [ ]	Spot [ ] Ba Limited [ ]	it [] Other []		
6B. N/A		N/A	N/A		
Date of Treatment by Inspecting Company	Common Name		Name of Pesticide, Bait or Other Metho	oa	
This company has a contract or warranty in effect for control of Yes [] No [X] List	Insects: N/A	ects:			
If "Yes", copy(ies) of warranty and treatment di	_				
Neither I nor the company for which I am acting have had, pr company for which I am acting is associated in any way with a	, ,	0 )	or sale of this property. I do further state	e that neither I nor the	
Signatures:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
7A. Inspector (Technician or Certified Applicator Name and Licer	TPCL #826837 nse Number)				
Others Present:					
7B. Greg Bryan #558140 Apprentices, Technicians, or Certified Applicators Name(s) ar	nd Registration/License Number(s)				
Notice of Inspection Was Posted At or Near:	8(-)				
8A. Electric Breaker Box [ ] Water Heater Closet [ ] Beneath the Kitchen Sink [X]	8B. Date Posted: 03	/26/2021			
9A.Were any areas of the property obstructed or inaccessible (Refer to Part B & C, Scope of Inspection) If "Yes" specify in 9B			[]		
9B.The obstructed or inaccessible areas include but are not lin Attic [ ] Insulated area of Deck [ ] Sub Floors Soil Grade Too High [ ] Heavy Foilage	mited to the following: of attic [X] Plumbing Area [ ] Slab Joints [ ] Eaves	s [X] Planter box a [ ] Crawl Space [X] Weepholes	abutting structure [ ] [ ] [ ]		
Other [ ] Specify: N/A					
10A.Conditions conducive to wood destroying insect infestatio (Refer to Part J, Scope of Inspection) If "Yes" specify in 10B.	on: Yes [X	] No	[]		
10B. Conducive Conditions include but are not limited to:					
Debris under or around structure (K) [X] Footin Planter box abutting structure (O) [ ] Wood	to Ground Contact (G) g too low or soil line too high (L) Pile in Contact with Structure (Q) (C) [ ] Specify: N/A	[ ] Formboards left in place [X] Wood Rot (M) [ ] Wooden Fence in Conta	[ ] Heavy Foliage (N)	[] []	

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11A.Subterranean Termites       Yes       [] No       [X]       Yes         11B.Drywood Termites       Yes       [] No       [X]       Yes         11C.Formosan Termites       Yes       [] No       [X]       Yes         11D.Carpenter Ants       Yes       [] No       [X]       Yes	Zip Code
11F. Explanation of signs of previous treatment (including pesticides, baits, existing treatment stickers or other methods) iden N/A	ified:
11G. Visible evidence of: N/A has been observed in the following areas: N/A	
If there is visible evidence of active or previous infestation, it must be noted. The type of insect(s) must be listed in the first blabe noted in the second blank. (Refer to Part D, E & F, Scope of Inspection)  12A. Corrective treatment recommended for active infestation or evidence of previous infestation with no prior treatment as is Scope of Inspection)  Yes [] No [X]  12B. A preventive treatment and/or correction of conducive conditions as identified in 10A & 10B is recommended as follows:  Specify reason:  Alterwood contact with home, Lower Soil (show 2-3" of slab), Remove debris, -or- preventative treatment of Inspection Part J	dentified in Section 11. (Refer to Part G, H, and I,  Yes [X] No [ ]
Diagram of Structure(s) Inspected  The inspector must draw a diagram including approximate perimeter measurements and indicate active or previous infestative conclusions, A-Active; P-Previous; D-Drywood Termites; S-Subterranean Termites; F-Formosan Termites; C-Conductor Carpenter Ants; Other(s) – Specify  N/A	on and type of insect by using the following codes: E- ive Conditions; B-Wood Boring Beetles; H-
Pool	
<b>→</b> 16.0	<del> </del>
C/L → 32.0 →	
	4 C/R 0:
residence	ਰੋਂ   C/R
44.0	
C/K 4	
C/R	
0.2 C/L 16.0 -	*
24.0	
¥ 21.0	
Additional Comments 21134 Stoney Haven Dr, Katy TX 77449. Drawing not to scale.	
Additional Comments To The Comments of the Com	

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21134 Stoney Haven Dr	Katy		77449			
21134 Stoney Haven Dr Inspected Address	City		Zip Code			
	Statement	of Purchaser				
I have received the original or a legible copy of this form. I have read and understand any recommendations made. I have also read and understand the "Scope of Inspection." I understand that my inspector may provide additional information as an addendum to this report.						
If additional information is attached, list number of p						
Signature of Purchaser of Property or their Designe	e	Date				
[ ] Customer or Designee Not present	Buyer's Initials					

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