Licensed and Regulated by the Texas Department of Agriculture, Structural Pest Control Service, PO Box 12847, Austin, Texas 78711-2847

	TEXAS OFFICIAL WOOD D	ESTROYING INSECT RE	PORT		Pa	age 2 of 2
The conditions conducive to insect infestation report 9.Will be or has been mechanically corrected by insp. If "Yes," specify corrections:			Yes	[]	No [✓	
9A.Corrective treatment recommended for active information as identified in Section 8. (Refer to Part 9B.A preventive treatment and/or correction of conductive Specify reason:	G H and I Scope of Inspection)		Yes : Yes		No [-	
10A. This company has treated or is treating the stru- If treating for subterranean termites, the treatment w If treating for drywood termites or related insects, the	cture for the following wood destroying as: Partial [ ] et reatment was: Full [ ]	insects: NA A Bai	t []	Other	[]	
Date of Treatment by Inspecting Compar This company has a contract or warranty in effect fo	ny Common r control of the following wood destroying	Name of Insect	Name o	of Pesticide, Ba	it or Other Met	nod
Yes [] No [] If "Yes", copy(ies) of warranty and tre		uura(a) la amaataal				
The inspector must draw a diagram including approx Evidence of Infestation, A-Active; P-Previous; D-Dry Carpenter Ants; Other(s) – Specify		dicate active or previous infes				
Carponer vine, Cities (c)						
	P					
3		3				
15						
	5 17 5					
42		34				
			<u> </u>			
		1				
/9	,					
			23			
	12					
	15 35		9			
Additional Comments 178-w-wo	02 Ray @ 2005	+5:m-				
DIB-K-I Colomn the Coundati	end removing	Geicks + St	one fo	som e	-gain	42
3) High paxis pour	redents insp	ection of	exter	2 701	ac ~ va	١٠٥٠.
Neither I nor the company for which I am acting have which I am acting is associated in any way with any	norty to this transportion	naving any interest in the prop	perty. I do furthe	er state that ne	ither I nor the c	ompany for
Signatures: 6 - B	Notice of12A.	Inspection Was Posted At or Electric Breaker Box	Near			
Inspector	IZA.	Water Heater Closet Bath Trap Access				
Signatures: C- B Inspector  Approved: Certified Applicator and Certified Applicator	SC7789 12B.	Beneath the Kitchen Sink Date Posted	Date	4-19		
	Statement of	Purchaser				
I have received the original or a legible copy of this f understand that my inspector may provide additional If additional information is attached, list number of pa	orm. I have read and understand any i	recommendations made. I ha	ave also read ar	nd understand t	the "Scope of Ir	ispection."
Signature of Purchaser of Property or their Designee Date						
SPCS/T-4 (Rev. 09/01/07)						