



4434 Bluebonnet Drive - Suite 153
Stafford, TX 77477
281-242-1300
TPCL #13562

TEXAS OFFICIAL WOOD DESTROYING INSECT REPORT

3006 PECAN WAY CRT
Inspected Address

RICHMOND
City

77406
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.
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 at time of inspection but which may be revealed in the course of repair or replacement work.
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.
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).
H. There are a variety of termite control options offered by pest control companies.
I. There are some specific guidelines as to when it is appropriate for corrective treatment to be recommended.
J. If treatment is recommended based solely on the presence of conducive conditions, a preventive treatment or correction of conducive conditions may be recommended.

1A. ABET Termite & Pest Control
1B. TPCL #13562
1C. 4434 Bluebonnet Drive - 153
1D. JAMES MESSINA
1E. Certified Applicator [X]
2. N/A
3. 1/6/21
4A. CLINT FRANKS
4B. N/A
4C. REPORT FORWARDED TO: Title Company or Mortgagee [ ] Purchaser of Service [ ] Seller [ ] Agent [ ] Buyer [X]

The structure(s) listed below were inspected in accordance with the official inspection procedures adopted by the Texas Department of Agriculture Structural Pest Control Service. This report is made subject to the conditions listed under the Scope of Inspection. A diagram must be attached including all structures inspected.

5. RESIDENCE AND GARAGE
List structure(s) inspected that may include residence, detached garages and other structures on the property. (Refer to Part A, Scope of Inspection)

6A. Were any areas of the property obstructed or inaccessible? Yes [X] No [ ]

Table with 4 columns: Area, Insulated area of attic, Plumbing Areas, Planter box abutting structure, etc. Includes checkboxes for various areas like Attic, Deck, Soil Grade Too High, etc.

7A. Conditions conducive to wood destroying insect infestation: Yes [ ] No [X]

7B. Conducive Conditions include but are not limited to: Debris under or around structure (K), Wood to Ground Contact (G), Formboards left in place (I), Excessive Moisture (J), etc.

Table for 8. Inspection Reveals Visible Evidence in or on the structure: 8A. Subterranean Termites, 8B. Drywood Termites, 8C. Formosan Termites, 8D. Carpenter Ants, 8E. Other Wood Destroying Insects.

8F. Explanation of signs of previous treatment (including pesticides, baits, existing treatment stickers or other methods) identified: NONE

8G. Visible evidence of: NONE has been observed in the following areas:

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 blank and all identified infested areas of the property inspected must be noted in the second blank. (Refer to Part D, E & F, Scope of Inspection)





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The conditions conducive to insect infestation reported in 7A & 7B:  
 9. Will be or has been mechanically corrected by inspecting company:  
 If "Yes," specify corrections: \_\_\_\_\_

Yes  No

9A. Corrective treatment recommended for active infestation or evidence of previous infestation with no prior treatment as identified in Section 8. (Refer to Part G, H, and I, Scope of Inspection)

Yes  No   
 Yes  No

9B. A preventive treatment and/or correction of conducive conditions as identified in 7A & 7B is recommended as follows:

Specify reason:  
 Refer to Scope of Inspection Part J

10A. This company has treated or is treating the structure for the following wood destroying insects: NONE

If treating for subterranean termites, the treatment was: Full  Spot  Bait  Other   
 If treating for drywood termites or related insects, the treatment was: Partial  Limited

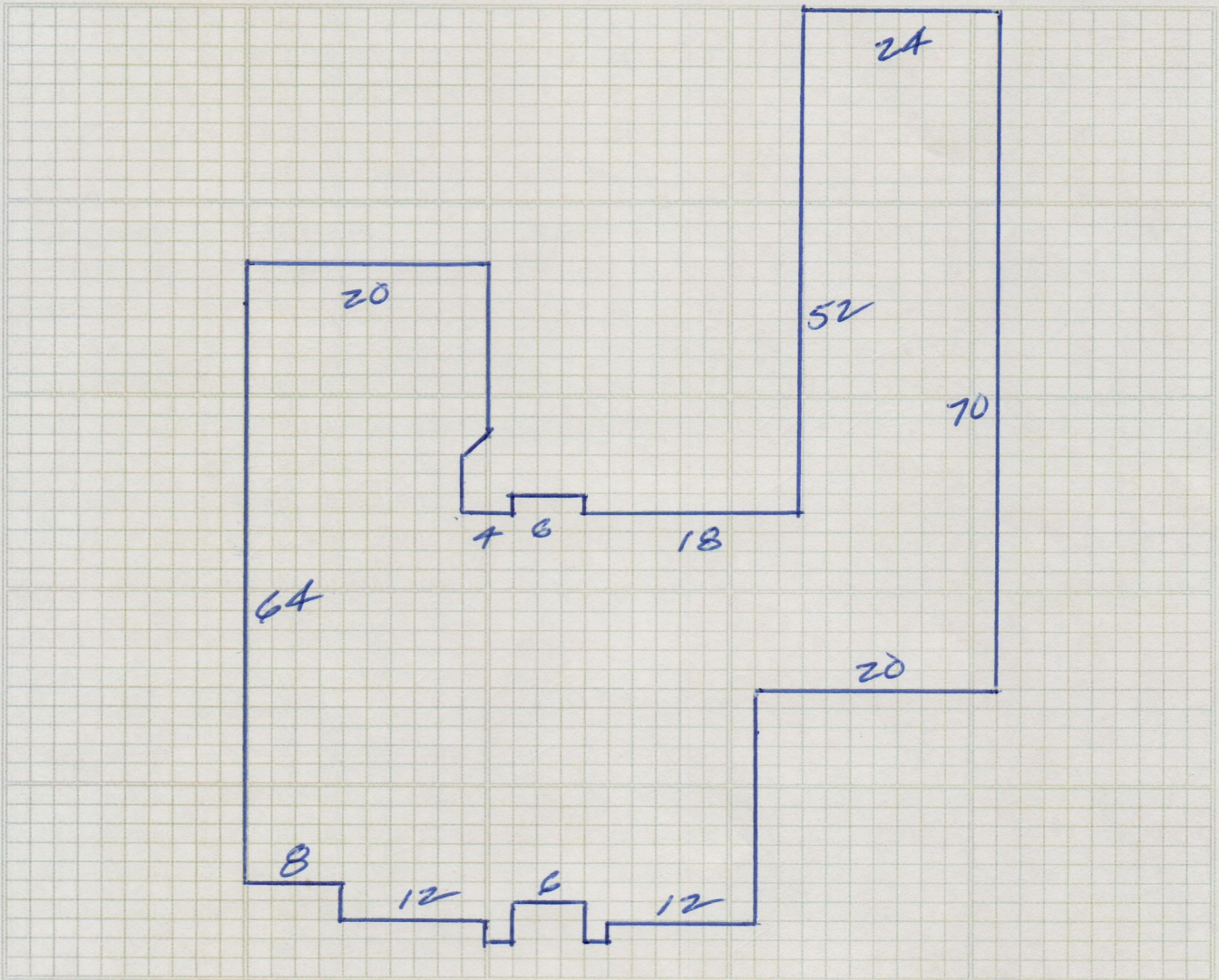
10B. N/A Date of Treatment by Inspecting Company N/A Common Name of Insect N/A Name of Pesticide, Bait or Other Method N/A

This company has a contract or warranty in effect for control of the following wood destroying insects:

Yes  No  List Insects: \_\_\_\_\_  
 If "Yes", copy(ies) of warranty and treatment diagram must be attached.

Diagram of Structure(s) Inspected

The inspector must draw a diagram including approximate perimeter measurements and indicate active or previous infestation and type of insect by using the following codes:  
 E-Evidence of Infestation, A-Active; P-Previous; D-Drywood Termites; S-Subterranean Termites; F-Formosan Termites; C-Conducive Conditions; B-Wood Boring Beetles;  
 H-Carpenter Ants; Other(s) - Specify \_\_\_\_\_



Additional Comments

Neither I nor the company for which I am acting have had, presently have, or contemplate having any interest in the property. I do further state that neither I nor the company for which I am acting is associated in any way with any party to this transaction.

Signatures:  
 11A. \_\_\_\_\_  
 Inspector

12A. Notice of Inspection Was Posted At or Near:

- Electric Breaker Box
- Water Heater Closet
- Bath Trap Access
- Beneath the Kitchen Sink

Approved:  
 11B. Juan M. Messias 45194  
 Certified Applicator and Certified Applicator License Number

12B. Date Posted 1/6/21  
 Date

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 pages: \_\_\_\_\_

Signature of Purchaser of Property or their Designee

Date