## 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.

3814 Knollcrest Dr	Montgomery	77356
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). At a minimum, the warranty must 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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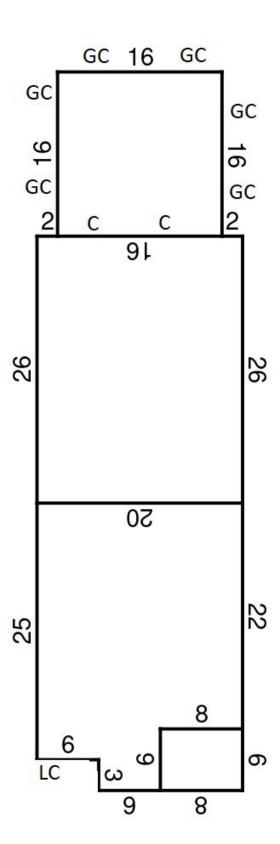
3814 Knollcrest Dr Inspected Address	Montgom City	nery			7356 Code	
1A. Stull Pest Control	1В. <u>0788</u>	415	00000			
Name of Inspection Company				s License Number		0 2026
1C. 11461 Lake Oak Drive Address of Inspection Company City	<u>Montgo</u> State	mery	<u>TX</u> Zip	7735	6 936-32 Telephone No.	0-3836
1D. Chris Stull		1E.	Certified Applic		(check one	1
Name of Inspector (Please Print)			Technician		(onder one)	,
Inspection Date				[7] · · · · · ·		
2. Misty and Allen Turco Name of Person Purchasing Inspection		Seller 🗀 .	Agent L Buye	er 🛂 Management Co	. LJ Other LJ	
3Owner/Seller						
4. REPORT FORWARDED TO: Title Company or Mortgagee ☐ F (Under the Structural Pest Control regulations only the purchaser	Purchaser of Serv of the service is		Seller $\square$ receive a copy)	Agent 🗹	Buyer 🗹	
The structure(s) listed below were inspected in accordance with the official in	spection procedu	res adopte	d by the Texas S	Structural Pest Control S	Service. This report is	s made subject
to the conditions listed under the Scope of Inspection. A diagram must be atta 5A. Single Family Residence						
List structure(s) inspected that may include residence, detached garages and	other structures	on the prop	erty. (Refer to F	art A, Scope of Inspect	ion)	
5B. Type of Construction:  Foundation: Slab ☑ Pier and Beam ☐ Pier Type:	<u>.</u>	٦				
Foundation: Slab ☑ Pier and Beam ☐ Pier Type:						
Roof: Composition ☑ Wood Shingle ☐ Metal ☐ Tile ☐ Other _						
6A. This company has treated or is treating the structure for the following woo						
If treating for subterranean termites, the treatment was:  Partial		Spot [	_	t 🗆 Oth	ner 🗆	
If treating for drywood termites or related insets, the treatment was: Full		Limited $\Box$		· <u> </u>		
6B			_			
	nmon Name of Ins			Name of Pesticide, Bait	or Other Method	
Yes No List Insects:	wood destroying i	iiisecis.				
If "Yes", copy(ies) of warranty and treatment diagram must b	e attached.					
Neither I nor the company for which I am acting have had, presently have, or	contemplate havi	ing any inte	rest in the purch	ase of sale of this prop	erty. I do further state	e that neither I
nor the company for which I am acting is associate in any way with any party Signatures:	to this real estate	e transactioi	n.			
7A						
Inspector (Technician of Certified Applicator Name and License Number	·)					
Others Present: 7B.						
7BApprentices, Technicians, or Certified Applicators (Names) and Registrat	ion/License Numb	ber(s)				
Notice of Inspection Was Posted At or Near:						
8A. Electric Breaker Box BB. Date Posted: 09/09/2021						
Water Heater Closet ☐  Beneath the Kitchen Sink ☑						
Beneath the Kitchen Sink    9A. Were any areas of the property obstructed or inaccessible?	Yes <b>☑</b>	No [	1			
(Refer to Part B & C, Scope of Inspection) If "Yes" specify in 9B.	163	NO L	•			
9B. The obstructed or inaccessible areas include but are not limited to the fo	· ·					
Attic ✓ Insulated area of attic ✓ Deck ✓ Sub Floors ✓	Plumbing	=		Planter box abutting str	ucture $\Box$	
Deck	Slab Joir Eaves	าเร		Crawl Space Weepholes		
Other Specify:	Laves		_	Weepholes		
10A. Conditions conducive to wood destroying insect infestation?	Yes 🗹	No [	]			
(Refer to Part J, Scope of Inspection) If "Yes" specify in 10B.						
10B. Conducive Conditions include but are not limited to:  Wood to Ground Contact (G)	$\square$	Formboard	s left in place (I)	☐ Excessive Moi	sture (I)	П
Debris under or around structure (K)  Footing too low or soil line too		Wood Rot (	,	Heavy Folia	` '	
Planter box abutting structure (O) Wood Pile in Contact with Stru	· · / —	· ·	,	with the Structure (R)	· · · · ·	
Insufficient ventilation (T) Other (C) 🗹 Specify: 🛚	Deck in o	contac	ct with	structure		_
		_	rtment of Ag			

Licensed and Regulated by The Texas Department of Agriculture PO Box 12847 Austin, Texas 78711-2847 Phone 866-918-4481, Fax 888-232-2567

3814 Knollcrest Dr	Montgo	mery			<u>77356</u>	
Inspected Address	City				Zip Code	
11. Inspection Reveals Visible Evidence in or on the structure:		nfestation		nfestation	Previous Trea	
11A. Subterranean Termites	Yes 🗆	No ☑	Yes 🗆	No ☑		10 ☑
11B. Drywood Termites	Yes 🗆	No 🗹	Yes 🗌	No ☑		√o ☑
11C. Formosan Termites	Yes 🗆	No 🗹	Yes 🔲	No 🗹		10 ☑
11D. Carpenter Ants	Yes 🗆	No 🗹	Yes 🗌	No 🗹		10 ☑
11E. Other Wood Destroying Insects	Yes 🗌	No 🗹	Yes 🗌	No 🗹	Yes 🗆 🛚 N	No ☑
Specify:						
11F. Explanation of signs of previous treatment (including pesticides, baits,	existing treatmer	nt stickers or othe	er metnoas) id	dentified:		
11G. Visible evidence of: has been obset	rved in the follow	ing areas:				
If there is visible evidence of active or previous infestation, it must be noted inspected must be noted in the second blank. (Refer to Part D, E & F, Scop 12A. Corrective treatment recommended for active infestation or evidence of	e of Inspection)			st blank and all id	entified infeste	d areas of the property
as identified in Section 11. (Refer to Part G, H and I, Scope of Inspec	•	a p	ti odiiiioiii	Yes 🗆		No ☑
12B. A preventive treatment and/or correction of conducive conditions as id		10R is recommen	nded as follo	_		√o □
Specify reason: Conducive conditions exis		TOD IS TECOMME	ided as iolio	ws. Tes 🖭	'	10 Ш
Refer to Scope of Inspection Part J	, c					
Diag: The inspector must draw a diagram including approximate perimeter measure Evidence of infestation; A-Active; P-Previous; D-Drywood Termites; S-Subtrants; Other(s) - Specify	rements and ind	ure(s) Inspecte icate active or pre es; F-Formosan Te	evious infesta	ation and type of i onducive Conditi	nsect by using ons; B-Wood B	the following codes: E- oring Beetles; H-Carpente
Arits, Other(s) - Specify						

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77356 Zip Code



3814 Knollcrest Dr	<u> </u>	
Inspected Address	City	Zip Code
Additional Comments		
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3814 Knollcrest Dr	Montgomery	77356		
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 pages:				
Signature of Purchaser of Property or their Designee	Date			
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l <del></del>				
Outton and Decimal and Decimal Business Initials				
Customer or Designee not Present Buyers Initials				

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