

Loflin Environmental Services, Inc.
2020 Montrose Blvd., Ste.100
Houston, TX 77006
713-521-3300

Invoice

BILL TO

AGAVE HOUSTON, LLC
Attn: Dustin Gaspari

INVOICE #	DATE	TOTAL DUE	DUE DATE	TERMS	ENCLOSED
27055	10/31/2018	\$225.00	11/30/2018	Net 30	

SALES REP
JAM

ACTIVITY	QTY	RATE	AMOUNT
LMS Post Flood Mold Assessment (10/12/18) 4603 Sylvan Glen Drive Houston, TX 77084 LES JOB#100-18-96 B	1	225.00	225.00

THANK YOU FOR YOUR BUSINESS->
Please make check payable to
LOFLIN ENVIRONMENTAL SERVICES, INC or
pay by VISA, AMEX or MasterCard by phone.

BALANCE DUE

\$225.00



LOFLIN ENVIRONMENTAL SERVICES, INC.

October 29, 2018

4603 Sylvan Glen Drive
Houston, Texas 77084

**Subject: Report of Post Flood Mold Assessment
4603 Sylvan Glen Drive – Houston, TX
Loflin Environmental Services Project No. 100-18-96B**

Dear Gentlemen,

Loflin Environmental Services, Inc. (**LOFLIN**) has completed a limited mold assessment at the above referenced residence. The purpose of this work was to assess mold growth within the ground floor of the house affected by flooding from Hurricane Harvey. This work was performed on October 12, 2018.

The house was visually inspected to identify suspect mold contamination due to flooding. At the time of the assessment, water damaged wallboard had been removed to an elevation of 9 feet. Flooring and wood components including cabinets and shelving had also been removed. Visual inspection revealed no mold growth on exposed wood framing or other surfaces.

Moisture readings were taken at exposed wood studs and sill plates. No wood framing with elevated moisture content was identified.

Based on visual inspection and moisture testing, there was no identified mold growth or conditions leading to future mold growth related to the flooding event.

Attached please find the Certificate of Mold Damage Remediation.

Loflin Environmental Services, Inc. appreciates this opportunity to provide these testing services. Should you have any further questions regarding this matter, please do not hesitate to contact us.

Sincerely,
Loflin Environmental Services, Inc.



James Murray, CIH, CSP
MAC0143



TEXAS DEPARTMENT OF INSURANCE

PC326 MDR-1 | Eff. 12/15/05

Regulatory Policy Division - Personal and Commercial Lines Office (104-PC)
333 Guadalupe, Austin, Texas 78701 ★ PO Box 149104, Austin, Texas 78714-9104
(512) 676-6710 | F: (512) 490-1014 | (800) 578-4677 | TDI.texas.gov | @TexasTDI

CERTIFICATE OF MOLD DAMAGE REMEDIATION

Certificate Number 100-18-90 Date of Issuance 10.29.18

Name Agave Houston, LLC

Mailing Address 4003 Sylvan Glen Drive

City HOUSTON State TEXAS Zip 77084

Property Description:

Number 4003 Street Sylvan Glen Drive Lot Block

Addition or Tract City HOUSTON County Harris

SIGN APPROPRIATE CERTIFICATION

Mold Assessment Consultant License Holder Certification

- I hereby certify that based on visual, procedural and analytical evaluation, the mold contamination identified for this project has been remediated as outlined in the mold management plan or remediation protocol.
I further certify with reasonable certainty that the underlying cause or causes of the mold that were identified for this project in the mold management plan or remediation protocol have been remediated. A copy of the written evaluation that forms the basis for my certification has been provided to the person named in this certificate.

Mold Assessment Consultant License Holder Signature

Department of State Health Services License No. and Expiration Date

Date

Mold Remediation Contractor License Holder Certification

- I hereby certify that I completed mold remediation on this project and will provide the mold remediation certificate to the property owner no later than the 10th day after the date of completion.

Mold Remediation Contractor License Holder Signature

Department of State Health Services License No. and Expiration Date

Date of Completion

OR

Mold Assessment Consultant or Adjustor License Holder Certification

- I hereby certify that I have inspected the property described in this certificate and that based on my inspection I have determined that the property does not contain evidence of mold damage. A copy of the written evaluation that forms the basis for my certification has been provided to the person named in this certificate.

Mold Assessment Consultant/Adjustor License Holder Signature

Department of State Health Services License No. and Expiration Date

Date

MAC 143 exp 2/15/20 10/30/18