New Construction Subterranean Termite Service Record

This form is completed by the licensed Pest Control Company

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This information is required to obtain benefits. HUD may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

Section 24 CFR 200 926d(b)(3) requires that the sites for HUD insured structures must be free of termite hazards. This information collection requires the builder to certify that an authorized Pest Control company performed all required treatment for termites, and that the builder guarantees the treated area against infestation for one year Builders, pest control companies, mortgage lenders, home buyers, and HUD as a record of treatment for specific homes will use the information collected. The information is not considered confidential, therefore, no assurance of confidentiality is provided.

This report is submitted for informational purposes to the builder on proposed (new) construction cases when treatment for prevention of subterranean termite infestation is specified by the builder, architect, or required by the lender, architect, FHA, or VA.

All contracts for services are between the Pest Control company and builder, unless stated otherwise

Section 1: General Information (Pest Control Company Information)			
Company Name Aspen Pest Control, Inc.			
Company Address P.O. Box 1795	City Lake City	State FL	Zip 32056
Company Business License No JB182948	Company Phone No	386-755-3611	
FHA/VA Case No (if any)			
Section 2: Builder Information			
Company Name		Phone No	(11 1/1)
Section 3: Property Information			
Location of Structure (s) Treated (Street Address or Legal Description, City, State and Zip)			
Section 4: Service Information			
Date(s) of Service(s)			
Type of Construction (More than one box may be checked)	յ⊑լ′Slab □ Basemen	t □ Crawl □ Other	
Check all that apply			
☑ A Soil Applied Liquid Termiticide Brand Name of Termiticide <u>Dean Andre l</u> EPA Re	tu-tu-u Nla	,	
Approx Dilution (%) Approx Total Gallons I	egistration ino	Treatment completed of	n exterior [] Ves []/No
☐ B Wood Applied Liquid Termiticide	Allx Wholied 77(3()	rreatment completed of	TEXTERIOR TO 163 TO 140
Brand Name of Termiticide EPA R	egietration No		
Approx Dilution (%) Approx Total Gallons N	egistration no fix Applied		
☐ C Bait System Installed			
Name of System EPA Registration No	Nu	mber of Stations installed	
☐ D Physical Barrier System Installed			
Name of System Attach installation information (required)			
Service Agreement Available? ☑ Yes ☐ No			
Note Some state laws require service agreements to be issued Th	ıs form does not preemp	t state law	
Attachments (List)	, ,		
Comments J. Mass Jennall 246	lineal (t		
Name of Applicator(s) Algorithm (if required by State law) JF104376			
Name of Applicator(s) Wackey Certification No (if required by State law) JF104376 The applicator has used a product in accordance with the product label and state requirements. All materials and methods used comply with state			
and federal regulations	ia diato regulieritorito A	atoriaio aria motriodo t	out comply man out
		/	
Authorized Signature / Con Contraction	1-30	Date/_	1 /24 2
Warning: HUD will prosecute false claims and statements Conviction may result i			