## **New Construction Subterranean Termite Service Record**

OMB Approval No. 2502-0525 (exp. 9°/30/2022)

This form is completed by the licensed Pest Control Company.

# 39684

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, homebuyers, 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)	400 to 2		
Annan Root Control Inc			
Company Name Aspen Pest Control, Inc.  Company Address P.O. Rox 1795	City	Leke Oliv Ctate	FL Zip 32056
Company Business License No		Company Phone No	300-750-3011
Section 2: Builder Information	4012012		
Company Name Trent Gieheig Constr	uction.	TAG, Phone No	397-0545
Section 3: Property Information			
Location of Structure(s) Treated (Street Address or Legal Description, City	y, State and Zip)	143 SW. Arr	ow 6(en
Section 4: Service Information		THE CHINA	3-0-1
F 1-2020			
Date(s) of Service(s) 5-6-20/0			- 101
Type of Construction (More than one box may be checked)	Slab 🔲 Bas	sement	ner
Check all that apply:			
A. Soil Applied Liquid Termiticide	E2	687-779	
Brand Name of Termiticide: DOMANION EPA Registral	tion No.	200 221	
Approx. Dilution (%): Approx. Total Gallons Mix App	olled:	Treatment completed o	on exterior: Yes No
B. Wood Applied Liquid Termiticide			
		egistration No.	
Approx. Dilution (%): Approx. Total Gallons Mix App	pilea:		
C. Bait System Installed	No. No.	Number of C	antone to scale of
Name of System EPA Registrat	tion No	Number of S	tations installed
D. Physical Barrier System Installed		Zanakan	
Name of System Attach installa	ation information	(required)	
Service Agreement Available? Yes No Note: Some state laws require service agreements to be issued. This for	rm does not pree	empt state law.	
Attachments (List)			
Comments			
Name of Applicator(s) C   CCCV/	Cortificati	No (if required by Otate Isy)	IE104978
Name of Applicator(s)		No. (if required by State law)	
ne applicator has used a product in accordance with the product label and sigulations.	tate requirement	s. All materials and methods u	sed comply with state and fede
guidanoi o			

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010. 1012; 31 U.S.C. 3729, 3802)