#31936

New Construction Subterranean Termite Service Record

OMB Approval No. 2502-0525 (exp. 02/29/2012)

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 ills 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	a are between the Pest Control company and build	er, unless stated otherwise.		
Section 1: General Inf	ormation (Pest Control Company Information)		The second s	
Company Name:	Aspen Pest Control, INC			
	P.O. Box 1795	City Lake City	State FL	Zip 32056
Company Busines	s License No. JB182948 Company Phone No. 386-755-3611			
FHA/VA Case No.	(if any)		gargayan garaya ay aran da	
Section 2: Builder Info	ormation	Millermann der Millerdamsprachen im von datter der Frenze (ab 1904 miller von gabilitäter)	000	7471
Company Name	Mike Roberts		_Phone No	14/6
Location of Structure (s) Treated (Street Address or Legal Description, City, State and Zip) Mike Roberts 3995W Section 4: Service Information Date(s) of Service(s) 5-13-20 4				
Type of Constructi	on (More than one box may be checked) 🛮 🔀 8	Slab Basement [Crawl Cther	
Approx. Dilution (9 B. Wood Applied L Brand Name of Te Approx. Dilution (9 C. Bait system ins Name of System D. Physical Barrie Name of System Service Agreement Ava Note: Some state laws	rmiticide: Do Minical 2 EPA Reg %): 'O S Approx. Total Gallons Mix Applie liquid Termiticide rmiticide: EPA Reg %): Approx. Total Gallons Mix Ap	ed: 230 Treatment plistration No plied: Number of the companion (required) In does not preempt state law	completed on exterior: [_] `	1
regulations. Authorized Signature	C. Lacey and a product in accordance with the product label a Child Pacey cute false claims and statements. Conviction may result to		aterials and methods used co	