

CERTIFICATE OF COMPLIANCE FOR TERMITE PROTECTION

INFORMATION REQUIRED AS PER FLORIDA BLDG CODES 104.2.6 & 1816.1

CONTRACTOR: Schafer Construction

PERMIT #:

SITE LOCATION: 1601 Sw Howell St

Lake City, FL 32024-6432

DATE OF TREATMENT: 05/17/2023 TIME OF TREATMENT: 09:57:47 AM

AREA TREATED: SQUARE FOOTAGE: 0 LINEAR FOOT: 0

IDENTITY OF APPLICATOR: BYRNE, MICHAEL

PRODUCT NAME: Premise Pro .05%

CHEMICAL NAME: IMIDACLOPRID

(Different from product)

(For bait systems - list chemical name that will be used if termites are detected)

PERCENT CONCENTRATION: 0.05

(For bait systems - if you don't have the %=tell how many stations per foot)

NUMBER OF GALLONS: 412.00GA (For bait systems - enter # of stations used)

FINAL STATEMENT:

THE BUILDING HAS RECEIVED A COMPLETE TREATMENT FOR THE PREVENTION OF SUBTERRANEAN TERMITES. TREATMENT IS IN ACCORDANCE WITH THE RULES AND LAWS ESTABLISHED BY THE FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES.

I AGREE THAT THE ABOVE INFORMATION IS CORRECT AND REFERS TO THE ADDRESS LISTED ABOVE:

MICHAEL LITSEY / JF190027 CERTIFIED PEST CONTROL OPERATOR TURNER PEST CONTROL, LLC.