

Form Approved No. 250-0525  
(Exp. 07/31/2027)

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 not 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 200.320(b)(3) requires that the sales 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 areas against termite 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: <u>Aspen Pest Control, Inc.</u>	City: <u>Lake City</u>	State: <u>FL</u>	Zip: <u>32056</u>
Company Address: <u>P.O. Box 1795</u>	Company Phone No.: <u>386-753-3611</u>		
Company Business License No.: <u>JB182948</u>			
FHAVA Case No. (if any)			

**Section 2: Builder Information**

Company Name: <u>Laudin Construction</u>	Phone No.: <u>322-2266</u>
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**Section 3: Property Information**

Location of Structure(s) Treated (Street Address or Legal Description, City, State and Zip) 125 Shady Oaks Ln  
Lake City, FL 32250

**Section 4: Service Information**

Date(s) of Services: 12-11-2003

Type of Construction (More than one box may be checked)  Slab  Basement  Crawl  Other \_\_\_\_\_

Check all that apply.

A. Soil Applied Liquid Termicide. Domestic EPA Registration No. 53553-3-249  
Brand Name of Termicide: Domestic EPA Registration No. 53553-3-249  
Approx. Dilution (%): 4/5 Approx. Total Gallons Mix Applied: 450 Treatment completed on exterior:  Yes  No

B. Wood Applied Liquid Termicide  
Brand Name of Termicide: \_\_\_\_\_ EPA Registration No. \_\_\_\_\_  
Approx. Dilution (%): \_\_\_\_\_ Approx. Total Gallons Mix Applied: \_\_\_\_\_

C. Bait System Installed  
Name of System: \_\_\_\_\_ EPA Registration No. \_\_\_\_\_ Number 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. This form does not preempt state law.

Attachments (List): 202 ST Strain

Comments: None

Name of Applicant(s): JF/104376 Certification No. (if required by State law) JF/104376  
The applicant has used a product in accordance with the product label and state requirements. All materials and methods used comply with state and federal regulations.

Authorized Signature: Leagle George Date: 12-11-2003

Form 104376 (06/2000)  
Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (16 U.S.C. 1010, 1012, 31 U.S.C. 3729, 3802)