New Construction Subterranean Termite Service Record

OMB Approval No. 2502-0525 (exp. 09/30/2022)

This form is completed by the licensed Pest Control Company.

39578

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.

Date(s) of Service(s) Type of Construction (More than one box may be checked) Slab Basement Crawl Other Check all that apply: A. Soil Applied Liquid Termiticide Brand Name of Termiticide: Approx. Dilution (%): Approx. Total Gallons Mix Applied: EPA Registration No. Approx. Dilution (%): C. Bait System Installed Name of System EPA Registration No. PPA Registration No. Number of Stations Installed Name of System Attach installation information (required) Service Agreement Available? Service Agreement Available? Service Agreement Available? Yes No Note: Some state laws require service agreements to be issued. This form does not preempt state law. Attachments (List) Comments Name of Applicator(s) Certification No. (if required by State law) All materials and methods used comply with state and fede egulations.	물리 마음이 다른 아이들이 얼마나 아내는 아내는 아내는 아내는 아내는 그들이 얼마나 되었다.	Section 1: General Information (Pest Control Company Information)		
Company Address P.O. Box 1795 City Late City State E. Zip 32056 Company Business License No. B182348 Company Phone No. 386-755-3811	Company Name Aspen Pest Control Inc.			
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Section 2: Builder Information Company Name				
Company Name				
Location of Structure(s) Treated (Street Address or Legal Description, City, State and Zip) Date(s) of Service(s)	Company Name CFF-BAS Incorporated DBA Edgley Phone No. 623-6654 Section 3: Property Information Charles Lacy JR and Susan Jen Kins - 1000 - 600			
Location of Structure(s) Treated (Street Address or Legal Description, City, State and Zip) Date(s) of Service(s)				
Location of Structure(s) Treated (Street Address or Legal Description, City, State and Zip) Comments				
Section 4: Service Information Date(s) of Service(s)				
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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)

form HUD-NPMA-99-B (8/2008)