

Guaranty Certificate

Commitment to Install the Sentricon Colony Elimination System

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ort 1	white	, +	32038	High Sp	rings,	rl 3	2643
•		State	Zip Code	City J	7	State	Zip Code
1: one		WK:		HM: Phone	WK:,	252-2	39-6387
ILDER/CO	ONTRACTO	OR: DWC	Contrac	tina LL	C		
SCRIPTIO	N OF PRO	PERTY TREATE	ED: RESIDENTIAL		_/	шт	-
COMMITMENT DATE			CUSTOMER		INSTALLATION DATE		
		YEAR	ACCOUNT #		MONTH	DAY	YEAR
5	5	2020			MOITH	DAT	TEAN
	9	9090					
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This contract provides for re-treatment of a structure and the repair of damages caused by termites within the limits stated in this contract.



DAMAGE REPAIR AND RETREAT GUARANTEE PRE-CONSTRUCTION SERVICE AGREEMENT Subterranean Termites Formosan Termites

	Date of Proposal: 10/10/20
	Dwc Contracting LLC
Account Name - First This Middle Initial Last	Billing Name-Builder or Developer 364 Sw Sterling Ter
Service Address Number Street	Billing Address Number Street
City State Zip Code	High Springs Funder 32643 City 350 - 339 - 6382 State Zip Code
City State Zip Code	JUA 737 W301
Service Phone: Home Office Fax Line	Billing Phone: Home Office Fax Line
Cell Phone Email Address	Cell Phone Email Address
☐ Tenant ☐ Contact Person ☐ Home Phone ☐ Office Phone	New Home Owner
. TYPE OF STRUCTURE: TO PESIDENTIAL TO COMMERCIAL	MULTILINIT BUILDINGS:
TYPE OF CONSTRUCTION: CRAWL SPACE SLAB	L MULTI-UNIT: BUILDINGS:
STRUCTURES FOR SERVICE: N MAIN DWELLING	LI OTHER:
 PURPOSE OF SERVICE: PREVENTION: NEW STRUCTUR 	RE $lacksquare$ PREVENTION: ADDITION FOR EXISTING CUSTOMER
LOCATION OF NOTICE OF SERVICE (FL): □ N/A□	ATTIC CRAWL OTHER:
INITIAL INVESTMENT	METHOD OF PAYMENT
Termite Treatment	BALANCE OF\$
Advanced Renewal Fee\$	☐ Due Upon Completion by: ☐ CHECK ☐ CASH ☐ CREDIT CARD
Applicable Sales Tax\$	☐ Bill: To Be Paid In Full Within 30 Days Of Completion
TOTAL INITIAL COST\$	Other:
Down Payment\$	□ CHECK# □ CASH □ M/C □ VISA □ D/C □ AMEX
BALANCE DUE \$ 377	Card # Exp. Date /
LIMITATIONS, CONDITIONS OR EXCLUSIONS. SERVICE F	PROVISIONS
CERTICE	Kerioloko
annually for up to four (4) additional years provided that the COMPA periodic basis and payment of the Annual Renewal Fee is made on the company of the Annual Renewal Fee is made on the company of the Annual Renewal Fee is made on the company of	ear from the date of this Agreement. The guarantee may be renewed ANY has an opportunity to visually re-inspect the treated property on the before the expiration of the annual guarantee period. The COMPAN' and above for the first year. The COMPANY reserves the right to increase
Accepted By: ARROW EXTERMINATORS, INC.	TO THE PROPERTY OWNER OR PROPERTY MANAGER: this is in a home solicitation you may cancel this agreement by providin written notice to the seller in person, by telegram or by mail, This notic must indicate that you do not want the goods or services and must be
5602 Du 13th St Gainesville, FL Office Address 352-313-3642	delivered or postmarked before you sign this agreement. If you keep any part of a cash down receive an exact executed copy of this agreement. This agreement contingent on the approval of the branch manager.
Office Phone Fax Line	Accepted By: OWNER DUILDER / AUTHORIZED AGENT
Manager's Signature:	Signature:
	Print Name:
	200 PM 0 PM