CORPORATE HEADQUARTERS:

P.O. BOX 5369 116 N.W. 16TH AVENUE GAINESVILLE, FL 32627-5369

(352) 376-2661 FAX (352) 376-2791

www.flapest.com

SCIENTIFIC PEST CONTROL DIRECTED BY GRADUATE ENTOMOLOGISTS

Complete Pest Control Service Member Florida & National Pest Control Associations

Reply: 536 SE Baya Dr Lake City, FL 32025 Phone (386) 752-1703 Fax (386) 752-0171

Bryan Zecher Const PO Box 815 Lake City, FL

TERMITE TREATMEN	T CERTIFICATION
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Owner:	Permit Number:	
Richard Taylor		
Lot:	Block:	
Subdivision:	Street Address:	
	3560 SW Salem Rd	
City:	County:	_
Lake City	Columbia	
General Contractor:	Area Treated:	
Bryan Zecher Const.	370LF	
Date:	Time:	
07/23/18	8:30	
Name of applicator	Applicator ID Number:	
Bill Hendricks	JE3556	
Product Used: Active Ingredient: %Concentration	Number of gallons used:	
Premise: Imidacloprid: 0.10%	70	
Method of termite prevention treatment: Soil treatment	ment	

The building has received a complete treatment for the prevention of subterranean termites.

Treatment is in accordance with rules and laws established by the Florida Department of Agriculture and Consumer Services.

This form is proof of complete treatment for Certificate of Occupancy or Closing.

THIS IS PROOF OF WARRANTY

Authorized Signature:	Date:
P/41- 1 12	
Thelly Hearly	7/25/2018