



## Certificate of New Construction Subterranean Termite Treatment

This report is submitted for information purposes to the builder on (new) construction. Subterranean termite infestation is required by the Florida Building Code.

**All contracts for service are between the pest control operator and the property owner.**

### Section 1: HomeTeam Pest Defense

Company Address: 6694 Columbia Park Drive, Suite 3 City: Jacksonville

Zip: 32258 Company Phone No.: 730-2522

### Section 2: Builder Information

Company Name: MARINDA Contractor: 3650

### Section 3: Property Information

Building Permit No.: 000030500 Location of structure: Lot 33

Type of Construction: ☒ Slab ☐ Basement

Approximate depth of footing: \_\_\_\_\_ Outside: \_\_\_\_\_ Inside: \_\_\_\_\_

### Section 4: Treatment Information

Date(s) of Treatment: 10/29/12 EPA Registration No.: \_\_\_\_\_

Brand Name of Product(s) used: \_\_\_\_\_

Final mix solution: \_\_\_\_\_ Treatment area sq. ft.: 3106

Linear ft.: 200 Linear ft. of masonry voids: \_\_\_\_\_

Total gallons of termiticide applied: \_\_\_\_\_ Total number of termite bait stations installed: \_\_\_\_\_

Service agreement available? ☒ Yes ☐ No

Liquid treatment: ☐ Yes ☐ No

Liquid final exterior treatment: ☐ Yes ☒ No

Borate treatment: ☐ Yes ☐ No

Bait in lieu of pretreat: ☐ Yes ☒ No

This 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 Agricultural and Consumer Services.

Initial: \_\_\_\_\_

Note: State laws require service agreement to be issued. This form does not preempt State law.

Attachments (list): \_\_\_\_\_

Comments: TUTS install

Name of applicator(s): Casey Bayler Certification No.: 21134552

Authorized Signature: [Signature] Date: 10/29/12 Final: \_\_\_\_\_



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#30500

## FIELD DENSITY WORKSHEET

CLIENT Maronda Homes DATE 10-17-12  
PROJECT NAME Timberland Lot 33 PROJECT NO. \_\_\_\_\_  
EARTH CONTRACTOR \_\_\_\_\_ PERMIT NO. \_\_\_\_\_  
COMPACTION REQUIREMENT (%) 95 ☐ Standard Proctor TESTED BY S.L.  
TOTAL ON-SITE TIME \_\_\_\_\_ ☒ Modified Proctor FIELD CONTACT \_\_\_\_\_  
MILES FROM OFFICE \_\_\_\_\_  
☐ Limerock ☐ Subgrade ☐ Pipe Backfill ☐ Building Pad ☒ Building Footing ☐ Other \_\_\_\_\_

TEST LOCATION	LAB PROCTOR		TEST DEPTH	PROBE DEPTH	% MOIST.	WET DENSITY (PCF)	DRY DENSITY (PCF)	% COMP.
	DENS.	OMC						
	104.9	10.2	5/6	12"				
Center of S. Footing					5.2	107.3	102.0	97.2
Center of N. Footing					5.0	106.6	101.5	96.8
Center of W. Footing					4.8	106.7	101.8	97.0

REMARKS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- \* Density failed to meet minimum project requirement  
\*\* Retest indicates minimum density requirement was obtained.  
( ) Client is aware of unsatisfactory test results.