To: Subject: Date:

External Sender - From: (Matt Forsyth

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This report is submitted for informational purposes to the builder on proposed (new) constituction cases when treatment for prevention of subherranean termite infestation is specified by the builder, or required by the lender, architect, or very limited that is specified by the builder, architect. THA, or VA. All contracts for services are between the Pest Control company and builder, unless stated otherwise.	1 2 4 6
Section 1: General Information (Pest Control Company Information) Company Name: Aspen Pest Control, Inc. Company Address EQ. Box 11795 Company Business Loca Box 11795 Company Business Locares No. J. B182948 FHAVA Case No. (if any)	State FL Zp 32056
Section 2: Builder Information Company Name ADE Concrete	Phone No. 28,0-1888-78.52
Section 3: Property Information C.J. C.C. Geom. Car. per H. S. S. Location of Structure (s) Treated (Street Address or Legal Description, City, State agr. 4.9) (2445-54)	egiande ug El 37004
Section 4: Service Information Date(s) of Service(s) 1-27-2025 Type of Construction (More than one box may be checked) RTSlab Basement Crawl	n 🗆 Other
Termiticide Incorporate Calcus Mix Applied: Robert Color Subsequence Calcus Mix Applied: Robert Color Subsequence Calcus Mix Applied: Robert Color Subsequence Calcus Mix Applied: Annux Total Gallors Mix Applied:	Treatment completed on exterior. □ Yes P.No
informatio	Number of Stations installed
Service Agreement Available? Q.Yes DNo Note: Some state laws require service agreements to be issued. This form does not preempt state law Attachments (List).	
Comments SCOSE monthly Certification No. (if required by State law) JF104376 Name of Applicator(s) Door Name of Applicator(s) Door Name of Applicator(s) State law) JF104376 Name of Applicator(s) State law) JF104376 Name of Applicator(s) State law) JF104376 Name of Applicator(s) State law) JF104376 Name of Applicator(s) State law) JF104376 Name of Applicator(s) State law) JF104376 Name of Applicator(s) State law) JF104376 Name of Applicator(s) State law) JF104376 Name of Applicator(s) State law) JF104376 Name of Applicator(s) State law) JF104376 Name of Applicator(s) State law) JF104376 Name of Applicator(s) State law) JF104376 Name of Applicator(s) State law) JF104376 Name of Applicator(s) State law) State	Certification No. (if required by State law) JF104376 irrements. All materials and methods used comply with s
Authorized Streams Way of Co. Creace	Date 1-27-2025
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