

OFFICIAL GEORGIA WOOD INFESTATION INSPECTION REPORT

COMPANY NAME Active Pest Control, Inc. LICENSE NO. 98304
 ADDRESS 37 Calumet Parkway, Ste. 101, Newnan, GA 30263
 TELEPHONE NO. (770) 954-9941 DATE OF ISSUANCE 7/25/16
 SELLER Danny Hackley INSPECTOR Ryan York sp18065
 FILE NO. _____ PURCHASER(S) Rebecca McLean

SCOPE OF INSPECTION

An inspection of the below listed structure(s) was performed by a qualified inspector employed by this firm to determine the presence or previous presence of an infestation of the listed organisms and is not intended to be a structural report. Neither is this a warranty as to absence of wood destroying organisms. **This report is subject to all conditions enumerated on the reverse side and is issued without warranty or guarantee except as provided in Rule 620-6-.03 of the Rules of Georgia Structural Pest Control Act or subject to any treatment guarantee specified below.**

Main Structure Supported **Single family dwelling**

Other Structures (Specify) None

Address of Structure(s) 105 Ashley creek dr. Newnan ga 263

FINDINGS

Inspection Reveals Visible Evidence of:

Active Infestation

Previous Infestation

Subterranean Termites

YES NO

YES NO

Powder Post Beetles

YES NO

YES NO

Wood Boring Beetles

YES NO

YES NO

Dry Wood Termites

YES NO

YES NO

Wood Decaying Fungus (Not Molds and Mildews)

YES NO

YES NO

Were any areas of the structure obstructed or inaccessible?

YES NO

If Yes, list these areas (see item 3 on reverse side of form)

Wall Voids & Plumbing Areas

~~Wall and floor coverings, fixed ceilings, insulation~~

The following conditions conducive to infestation for wood destroying organisms were found at the time of inspection. The location of these conditions conducive to infestation are indicated on the attached diagram.

Earth to wood contacts appear pressure treated

Remarks / Additional Findings:

Call Ryan 6789254493 for termite and pest control

NOTE: If visible evidence of Active or previous infestation is reported it should be assumed that some degree of damage is present and a diagram identifying the structure(s) inspected and showing the location of such evidence must be attached to this form. Evaluation of damage and any corrective action should be performed by a qualified inspector in the building trade approved by the purchaser and lending agency.

TREATMENT

The above described structure(s) was treated by this company as follows:

Organism

Treatment Date

Contract Expiration Date

Type Treatment (chemical barrier, bait, wood treatment)

Subterranean Termites

N/a

Powder Post Beetles

Wood Boring Beetles

Dry Wood Termites

Wood Decaying Fungus

The present treatment warranty(ies) is:

Transferable to any subsequent owner of the property upon payment of a fee on or before the expiration date.

Not transferable to any subsequent owner of the property.

The above structure(s) are not covered by a treatment contract with this company.

45.00 check paid

This structure has a current Official Waiver Form issued by this Company Yes No

If Yes, a copy must be attached as part of this report.

CERTIFICATION

This is to certify that neither I nor the company has had or contemplates having any interest in the property involved, nor is acting in any association with any party to the transaction.

Teresa Beirigh sp17642
 Signature of Designated Certified Operator

 Signature of Purchaser or Legal Representative Acknowledging Receipt of Report

CONDITIONS GOVERNING THIS REPORT

1. This report is limited to the five organisms listed.
2. This report covers only those structures listed on the front.
3. Inspection, including sounding and/or probing, was performed in only those areas which were readily accessible. Inaccessible areas not inspected include, but are not limited to areas obstructed by, floor coverings, siding, fixed ceilings, insulation, furniture, appliances or other personal items. The inspection also included a check of company records to determine if the structure has been treated and/or under renewal contract with the company within the past two years for any of the covered organisms. A copy of any current Official Waiver form for this structure must be included as part of this report.
4. Reporting of Wood Destroying Fungi on this report is intended to cover only white rot, brown rot or water conducting fungi infestations which occur below the first floor level. This report does not cover the reporting of molds and mildews. Structural Pest Control companies are not responsible for inspecting for molds.
5. The term Wood Boring Beetles as used on the reverse side means only those beetles which are known to establish and maintain a continuing infestation in structures, such as, but not limited to the Old House Borer.
6. Regardless of whether any visible evidence of infestation by any of the listed Wood Destroying Organisms is found during inspection, if an infestation of one or more of these organisms from which apparent freedom was certified is found within 90 days of issuance of this report the property shall receive, free of charge, a minimum adequate treatment of control of the infestation consistent with Rules 620-6-.03 (1)(a), (b), (c) and (d), of the Georgia Structural Pest Control Act. Any condition conducive to infestation as defined in item nine (9) below that is known to have existed at the time of inspection and was not reported and is found within one (1) year from the date of this report shall be corrected for free of charge by the licensee.
7. This is not a structural report. A wood destroying organism inspector is not ordinarily a construction or building trade expert and is therefore not expected to assess structural soundness. Evaluation and correction of damage which may have resulted from an active or previous infestation should be performed by a qualified inspector in the building trade, who is approved by the purchaser and the lending agency.
8. This report implies no responsibility on the part of the Georgia Department of Agriculture or the Georgia Structural Pest Control Commission to enforce or require anything other than treatment or retreatment to the minimum adequate treatment requirements specified in Rule 620-6-.04.
9. Conditions conducive to Infestation means conditions that exist in a structure that favor the development of wood destroying organisms. These are limited to: cellulosic material underneath a building and wood in contact with the soil which has not been treated with preservatives to a minimum preservative retention designed for ground contact and ventilation of the under-floor space between the bottom of the floor joists and the earth that does not meet the requirements of the International Residential Building Code for one and two family dwellings, the latest edition as adopted and amended by the Georgia Department of Community Affairs.

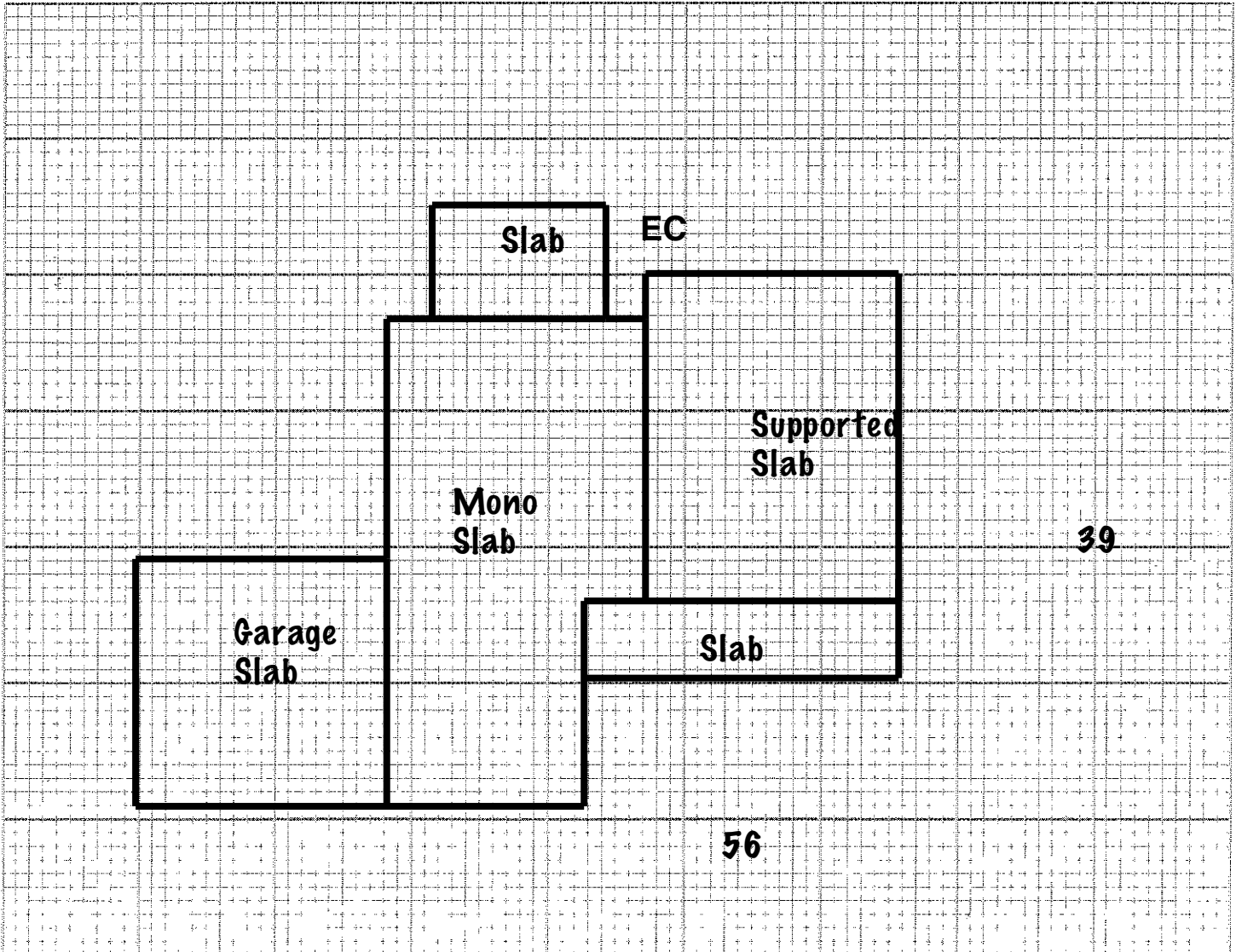
ACTIVE INSPECTION GRAPH

OWNER'S NAME Rebecca L. Mclean OCCUPANT _____

TREATING ADDRESS 105 Ashley creek dr. CITY Newnan STATE Ga 30263

HOME PHONE _____ BUSINESS PHONE _____ INSPECTED BY Ryan York sp18065

TREATMENT NOTICE
DATE: _____
TIME: _____



LIQUID OR BAIT

KEY TO EVIDENCE OF:
 SUBTERRANEAN TERMITES = **XXX**
 EARTH-WOOD CONTACTS = **EC**
 POSSIBLE HIDDEN DAMAGE = **PHD**
 EXISTING DAMAGE = **⊗**

POWDER-POST BEETLES = **PPB**
 WOOD BORING BEETLES = **WB**
 FUNGUS = **F**
 WELL/CISTERN = **W/C**

CARPENTER ANTS = **CA**
 CELLULOSE DEBRIS = **CD**
 EXCESSIVE MOISTURE = **EM**
 FAULTY GRADE = **FG**

LN. FT. 190

STORIES _____

YEAR BUILT _____

TYPE OF CONSTRUCTION: CRAWL SPACE BASEMENT MONOLITHIC SLAB FLOATING SLAB SUPPORTED SLAB
TYPE OF FOUNDATION: CONCRETE HOLLOW BLOCK BRICK STONE OTHER
PROPERTY HAS A:
 1. WELL YES NO
 2. CISTERN YES NO
 3. SUMP PUMP YES NO
 4. FRENCH DRAIN YES NO
 5. STUCCO BELOW GRADE YES NO
 6. "RIGID FOAM INSULATION" BELOW GRADE YES NO
 7. INACCESSIBLE AREA(S): _____

INSPECTOR'S STATEMENT OF VISIBLE DAMAGE

CONTROL TECHNICIAN'S STATEMENT OF VISIBLE DAMAGE

None found

BY: Ryan York sp18065 DATE: 7/25/16

BY: _____ DATE: _____

THE ABOVE GRAPH, AND THE AREAS CONTAINING VISIBLE ACTIVITY OR DAMAGE, HAVE BEEN DESCRIBED TO ME AND ARE AFFIRMED BY ME AS OWNER OR AGENT OF THE ABOVE PROPERTY. I ALSO AFFIRM THAT I UNDERSTAND THAT ACTIVE PEST CONTROL IS NOT LIABLE FOR HIDDEN DAMAGE WHICH IS CONCEALED, OBSTRUCTED OR INACCESSIBLE TO THE INSPECTOR.

DATE: 7/25/16

BY: _____

SCOPE OF INSPECTION

An inspection of this structure or structures was performed by a qualified inspector employed by this firm, to determine the presence or previous presence of an infestation of the listed organisms and is not intended to be a structural report. Neither is this a warranty as to absence of wood destroying organisms, and is governed by the conditions enumerated below.

1. If visible evidence of active or previous infestation is reported it should be assumed that some degree of damage may be present and this diagram identifies the structure(s) inspected and showing the location of such evidence. It is possible that damage may (as the date of this report) exist in unexposed areas of the structure or in areas of the structure or in areas which are inaccessible to visual inspection.
2. Evaluation of damage or possible damage that is indicated on the reverse side should be performed by a qualified inspector in the building trade.
3. This report is for, but not limited to those organisms for which treatment has been performed by this company, or if this report is used for the transfer of real property, by the official Georgia wood infestation inspection report as amended.
4. This report covers only those structures listed on the reserve side, and is not intended to cover such items as fencing, planters, trellises, or landscape timbers, etc. any outbuilding must have a separate graph and report.
5. Inspection, including sounding and/or probing, was performed in only those areas which were readily accessible. Inaccessible areas not inspected include, but are not limited to areas obstructed by floor covering, wallcovering, stucco exterior or foundation insulation, siding, fixed ceiling, insulation, furniture, appliances or other personal items.
6. Reporting of wood destroying fungi on this report is intended to cover only infestation which occur below the first floor level and which result from moisture conditions which can be corrected through application of a moisture barrier and/or increased ventilation and does not cover conditions resulting from roof or plumbing leaks, or improper drainage or surface water, EIFS (Stucco) or exterior insulation finishing systems (RBI).
7. The term wood boring beetles as used on the reverse side means only those beetles which are known to establish and maintain a continuing infestation in structures, such as but not limited to the old house borer, and powder post beetles.
8. This is not a structural or damage report. A wood destroying organism inspector is not ordinarily a construction or building trade expert and is therefore not expected to assess structural soundness. Evaluation and correction of possible damage which may have resulted from an active or previous infestation should be performed by a qualified inspector in the building trade.
9. If property described on reserve side of this report is currently under a treatment warranty, additional restrictions may apply, refer to customer service agreement for additional restrictions or limitations of these warranties
10. Conditions Conductive To Infestation -- means conditions that exist in a structure that favor the development of wood destroying organisms. These are limited to: Cellulosic material underneath a building, wood in contact with the soil which has not been treated with preservatives to a minimum preservation retention rate of .40 pounds per cubic foot for ground contact and ventilation that does not meet the requirements specified in Rule 620-6-04(1)(a)(7).
11. Form II exclusions: A Form II letter is required by the Georgia Structure Pest Control Commission, which a structure is not being treated to minimum treatment standards. Due to this fact any structure that required a Form II letter as part of the initial treatment may not qualify for a repair and treatment coverage. If Form II Block is checked on the main contract (front page), the owner hereby agrees to sign Form II and not hold Company responsible for any damage or repairs associated with the deviations from the minimum treatment standards. The Customer releases the Company, its successors and/or as signs from liability for treatment, retreatment, or repair of any area associated with or identified on Form II letter. If later treatment of these is elected by the Customer, the Customer agrees to be responsible for the preparation for treatment including but not limited to removal of floor covering, desks, walls, porches, access panels, creating access to any inaccessible place.



THIS CONTRACT PROVIDES FOR RETREATMENT OF A STRUCTURE AND THE REPAIR OF DAMAGE CAUSED BY WOOD DESTROYING ORGANISMS WITHIN THE LIMITS STATED IN THIS CONTRACT

CORPORATE OFFICE • 80 CANDLER ROAD • MCDONOUGH, GA 30253 • 770-954-9941
 Cumming 770-889-4288 • Fayetteville 770-954-9941 • Lawrenceville 770-954-9941 • Marietta 770-954-9941
 McDonough 770-914-9500 • Middle Georgia 478-741-9611 • Newnan 770-683-2670 • Roswell 770-521-6733

LIFETIME TERMITE SERVICE AGREEMENT

<input checked="" type="checkbox"/> Termite Bait Protection\$ 599 <input type="checkbox"/> Install Moisture Barrier.....\$ _____ <input type="checkbox"/> Install _____ Ventilators\$ _____ <input checked="" type="checkbox"/> Other (Monitoring Fees) <u>First year</u>\$ <u>Included</u> <input type="checkbox"/> Other\$ _____ <p style="text-align: right;">Total Charges \$ 599</p> <p style="text-align: right;">Amount Collected This Date \$ _____</p> <p style="text-align: right;">Balance Due \$ _____</p> <p>Monitoring Fees To Begin <u>7</u> / <u> </u> / <u>2017</u> <u> </u> Initial, agrees to accept emailed service tickets</p> <p>INITIAL PAYMENT: <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit Card Amount Remitted with Agreement.....\$ _____</p> <p>METHOD OF PAYMENT: <input type="checkbox"/> Paid Year In Advance <input type="checkbox"/> Deduct Credit Card Each Service</p> <p>CREDIT CARD INFORMATION: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> DiscoverCard <input type="checkbox"/> AmExpress</p> <p>Card # _____ Customer Name (As On Card) _____ Expiration Date: ____ / ____ / ____</p>	<p>Realtor <u>7/25/16</u> _____ Date</p> <p>Lead Source <u>Rebecca McLean</u> _____</p> <p>Name <u>105 Ashley creek dr</u> _____</p> <p>Address <u>Newna ga 30263</u> _____</p> <p>City _____ State _____ Zip Code _____</p> <p>Home Phone _____ Cell _____ Work Phone _____</p> <p>Email Address <u>Same</u> _____</p> <p>Service Address _____ _____</p>
--	--

Repair: In consideration of sums received for providing control of Subterranean termites on the premises specified above, Active Pest Control issues a **Lifetime Warranty Protection Plan** with **no deductible**. Active Pest Control will make such repairs to the premises and contents to remedy any new damage caused by Subterranean Termites. The owner understands that no repairs be made until Active Pest Control have examined the structure and that Active Pest Control's liability under this guarantee shall in no event exceed replacement value of the home. Refer to reverse side for terms and conditions of this agreement. Repair guaranteed graph must be attached, listing present activity and present damage at the time of installation.

Retreat: In consideration of sums received, and to be received for providing control of subterranean termites on the premises specified above, Active Pest Control issues this Protection Plan and at no cost will make such treatments to the premises to remedy any new infestation after control period. Refer to the reverse side for terms and conditions of this agreement.

Service of the Active Monitoring: *The cost to monitor the Baiting System shall be \$ 75.00 quarterly/yearly to be paid at the time of service and to run consecutively for a minimum of one year. All payments must be made and be current for customer to have claim on the protective features of this contract. Accounts shall be considered delinquent at 30 days and subject to termination of service and removal of the Active Baiting Systems Components. Active Pest Control will perform an annual re-inspection upon request. This charge may be revised in any succeeding year after the first year.

IF THIS IS A HOME SOLICITATION YOU MAY CANCEL THIS TRANSACTION AT ANY TIME PRIOR TO MIDNIGHT OF THE THIRD BUSINESS DAY AFTER THE DATE OF THIS TRANSACTION. THIS AGREEMENT IS TO BE CONSTRUED AS THE WARRANTY. THE WARRANTY WILL BE VALID UPON PAYMENT IN FULL. SEE ATTACHMENTS FOR JOB SPECIFICATIONS, WHICH BY THIS REFERENCE BECOMES PART OF THIS AGREEMENT.

"The Georgia Structural Pest Control Act requires all pest control companies to maintain insurance coverage. Information about this coverage is available from this pest control company."

ACTIVE PEST CONTROL, INC.
 By: Ryan York sp18065
 Title: Inspector

CUSTOMER
 Signature: _____
 Title: Homeowner

THE REMOVAL OF THE BAIT OR BAITING SYSTEM MAY RESULT IN A LACK OF TERMITE PROTECTION.

TERMS AND CONDITIONS

1. GENERAL CONDITIONS AND LIMITATIONS:

- A. **Service Commitment.** Active Pest Control (the "Company") will be in compliance with all applicable federal, state, and local rules and regulations.
1. Install Termite Baiting stations (the "Stations") in the soil around the outside perimeter of the structure
 2. Monitor those Stations during the service time (Quarterly or Tri-Annually)
 3. During the time, add termite bait to and remove it from the Stations as appropriate
 4. Inform the Customer of:
 - a. any new or increased termite activity noted at the Stations
 - b. any addition or removal termite bait
2. This warranty shall remain in force one year from the contract date noted herein, provided that the undersigned contractor visually reinspects the premises annually upon request and provided the owner pays the undersigned contractor an annual warranty fee. Failure to pay the warranty fee within 30 days after the anniversary of the contract date shall void this warranty without the privilege of reinstatement.
3. **EXISTING DAMAGE.** Active is not responsible for the repair of either visible damage (noted on the attached inspection Graph) or hidden damage existing as of the date of this agreement. Because damage may be present in areas which are inaccessible to visual inspection, Active does not guarantee that the damage disclosed on the inspection graph represents all of the existing damage as of the date of this agreement.
4. **WATER LEAKAGE.** Water leakage in treatment areas, and leakage in interior areas or through the roof or exterior walls of the identified property, may destroy the effectiveness of Active treatment and is conducive to new infestation. Purchaser is responsible for making timely repairs as are necessary to stop leakage. Upon completion of repairs by Purchaser, Active will provide additional treatment to control infestation at Purchaser's expense. If Purchaser elects not to repair said defects or purchase the additional necessary treatment, then Active will have no further obligation under this agreement.
5. **ADDITIONS, ALTERATIONS.** This agreement covers the property identified on the Inspection Graph as of the date of initial treatment. In the event the premises are structurally modified, altered or otherwise changed or if soil is removed or added around the foundation, Purchaser will immediately notify Active and will purchase the additional treatment required by the changes incurred. Failure to do so will terminate this agreement automatically. In event of structural modification, Active also reserves the right to adjust the annual extension charge.
6. **NOTICE OF CLAIMS, ACCESS TO PROPERTY.** Any claim under the terms of this agreement will be made immediately in writing to any Active office. Active is only obligated to perform under this agreement provided the Purchaser allows Active access to the identified property for any purpose contemplated by this Contract, including but not limited to reinspection, whether the inspection was requested by the Purchaser or considered necessary by Active.
7. **SUBTERRANEAN TERMITE TREATMENT WARRANTY.** Active will issue to me a treatment warranty which obligated Active at no extra cost to me, to apply any necessary additional treatment to my building if an infestation of Subterranean Termites is found during the effective period of my Warranty. Customer agrees to maintain the treated structure free from any condition conducive to termite infestation including moisture, roof leaks, improper ventilation or faulty plumbing, firewood, trash, lumber, wood, foam insulation, stucco, siding and other insulation materials 6" from contact with the ground or structure which permit hidden termite entry.
8. **CHANGE IN LAW.** Active performs its services in accordance with the requirements federal, state and local law. In the event of a change in existing law as it pertains to the services promised herein, Active reserves the right to revise the annual extension charge or terminate this agreement.
9. **NON-PAYMENT, DEFAULT.** In case of non-payment or default by the Purchaser, Active has the right to terminate this agreement and reasonable attorney's fees and cost of collection shall be paid by Purchaser, whether suit is filed or not. In addition, interest at the highest level rate will be assessed for the period of delinquency.
10. **FEDERAL ARBITRATION ACT.** Any dispute arising out of or relating to this agreement or the services performed under this agreement or tort based claims for personal or bodily injury or damage to real or personal property shall be finally resolved by arbitration administered under the commercial arbitration rules of the American Arbitration Association. This agreement involves interstate commerce; furthermore, the parties expressly agree that their mutual rights and obligations and the conduct of any arbitration proceeding shall be controlled by the Federal Arbitration Act. The award of the arbitrator shall be final, binding, non-appealable and may be entered and enforced in any court having jurisdiction in accordance with the Federal Arbitration Act. The arbitrator shall not have the power or authority to award exemplary, treble, liquidated or any type or punitive damages.

OFFICIAL WAIVER

Of the Georgia Minimum Treatment Standards for the Control of Subterranean Termites

NOTICE TO PROPERTY OWNERS/AGENT - DO NOT SIGN THIS DOCUMENT UNTIL YOU HAVE READ AND SIGNED "CONDITIONS GOVERNING THE USE OF OFFICIAL WAIVER OF THE MINIMUM TREATMENT STANDARDS FOR THE CONTROL OF SUBTERRANEAN TERMITES" IN THIS DOCUMENT. THESE "CONDITIONS" MUST BE CONSIDERED PART OF THIS DOCUMENT. YOU MUST RECEIVE A COPY OF THIS REPORT AND SUPPORTING GRAPH AT TIME OF SIGNING OR SERVICE.

CONDITIONS GOVERNING THE USE OF THE OFFICIAL WAIVER OF THE MINIMUM TREATMENT STANDARDS FOR THE CONTROL OF SUBTERRANEAN TERMITES

- 1. The Official Waiver of the Minimum Treatment Standards for the Control of Subterranean Termites is intended to be used ONLY in situations where it is not possible or practical to meet the minimum treatment standards established by the Georgia Structural Pest Control Commission.
2. The Official Waiver of the Minimum Treatment Standards for the Control of Subterranean Termites is not to be used to bypass the minimum treatment standards not is it used to notify any agency of government that a termite treatment has been completed.
3. By signing this document the property owner/agent acknowledges that the property identified will not receive a complete minimum treatment.
4. Each "no" must be explained in detail in the area provided on this document as to specifically what areas of the structure do not meet the treatment standards and why it is not possible to meet these treatment standards.
5. All sections of this document must be filled out completely. Failure to comply with this requirement or failure to provide the explanation required in "Condition #4" above will constitute a violation involving misuse of this form and may render it void.

Name of Company Ryan York sp18065
Address of Company 105 Ashley creek dr.newnan ga 30263
Owner of Property Rebecca McLean
Inspector name and certification/registration number Ryan York sp18065
Address of Structure Treated - Note: A separate Official Waiver is required for each individual structure. Reproductions of the Official Waiver for multiple structures is not acceptable
105 Ashley creek dr Newnan ga 30263
Phone Number of Property Owner/Agent

Indicate with a check mark those items that do NOT meet the minimum treatment standards.

SECTION ONE - TERMITE CONTROL

SOIL TREATMENTS- Note: For defined post construction soil treatments and pre-construction soil treatments, only item #1, 2, and 3 are applicable

Type of Treatment: Check One

- Comprehensive post construction soil treatment
Defined post construction soil treatments
Pre-construction soil treatment

Date Job Completed

- 1. All debris removed
2. Wooden contacts removed or insulated
3. Crawl space clearance 18 inches or greater
4. Foundation adequately drilled/treated
5. Voids adequately drilled/treated
6. Earth filled porches adequately drilled/treated
7. Contiguous slabs adequately drilled/treated
8. Slabs at/above grade adequately drilled/treated
9. Monolithic slabs adequately drilled/treated
10. Termite tunnels removed

Non Soil Pesticide, Device, Bait or Baiting System - Note: All items pertain to both post-construction and pre-construction applications

Date Job Completed

- 1. All debris removed
2. Wooden contacts removed
3. Crawl space clearance 18 inches or greater
4. Barrier or baiting system installed consistent with label directions Not Applicable

NO
[]
[]
[]

Explain in detail what areas of the structure do not meet standards and why it is not possible to meet these treatment standards. Also, attach a graph indicating the area(s) that were not treated to minimum standards. Failure to attach a graph and provide detailed written explanation will void this document. Use other side if necessary.

Earth to wood contacts not removed by active pest control or homeowner in order to preserve the aesthetics of the structure.

Signature of Property Owner/Agent Date 7/25/16



80 Candler Road
McDonough, GA 30253
770.954-9941 *PHONE*
770.954.9842 *FAX*

Electronic Communication Acknowledgement Statement. In accordance with state regulations, pest control companies have a responsibility to provide you with a record every time a pesticide product and/or pest system is applied. This record is required to be provided to the property owner, resident or custodian of the property. This record may include post-application precautionary information. Licensed and regulated by the Georgia Department of Agriculture, 19 Martin Luther King, Jr. Drive, Atlanta, Georgia 30334, (404) 656-3641.

I understand and request that my pesticide use records be provided or made available to me electronically.

Signature of owner, resident or custodian of the property & Date

Property Address

Street 1		
Street 2		
Newna ga 30263		

I do not want electronic documentation at this time

“Where relationships matter”