General Description: Inspection Tag Posted:

An inspection has been made of the structure(s) shown on the diagram in accordance with the Structural Pest Control Act. Detached porches, detached steps, detached decks and any other structures not on the diagram were not inspected.

If any of the above boxes are checked, it indicates that there were visible problems in accessible areas. Read the report for details on checked items.

Ordered By: JAIME MILLER FAIRA CORP
Property Owner and/or Party of Interest: RUBY (DAUGHTER OF OWNER) 559-799-4076
Report sent to:

Registration #: PR5699
Escrow #: 563

☑ COMPLETE REPORT ☐ SUPPLEMENTAL REPORT ☐ CORRECTED INSPECTION REPORT
☐ LIMITED REPORT ☐ REINSPECTION REPORT ☐ SEPARATED REPORT

General Description:
SINGLE STORY, SINGLE FAMILY RESIDENCE, COMPOSITION ROOF, CONCRETE FOUNDATION, OCCUPIED, FURNISHED

Inspection Tag Posted:
Garage

Other Tags Posted:

If any of the above boxes are checked, it indicates that there were visible problems in accessible areas. Read the report for details on checked items.

Diagram Not to Scale. Items Are In Approximate Location

———
Inspected by: Todd Tenhet  State License No. OPR 10083  Signature

You are entitled to obtain copies of all reports and completion notices on this property reported to the Structural Pest Control Board during the preceding two years. To obtain copies contact: Structural Pest Control Board, 1418 Howe Avenue, Suite 18, Sacramento, California 95825-3204.

NOTE: Questions or problems concerning the above report should be directed to the manager of the company. Unresolved questions or problems with services performed may be directed to the Structural Pest Control Board at (916) 561-6708 or (800) 737-8188 or www.pestboard.ca.gov. 43M-41 (Rev. 10/01)
NOTICES

INACCESSIBLE AREAS
This inspection and report covers the visible and accessible areas of the building shown on the diagram. Interiors of hollow walls, inaccessible areas, carpentered areas, spaces between floor an ceilings below, spaces between a deck and a soffit below, stall showers over finished ceilings with no evidence of water staining on finished ceiling below, buttress areas and walls that are covered or hidden by furniture, appliances, cabinets, storage and/or personal possessions and locked areas and/or any area where inspection is only possible through tearing out or defacing of finished work are considered inaccessible and not inspected. Such inspections would be cost prohibitive and impractical unless otherwise noted herein. Such areas were not inspected and are not part of this report.

We do not guarantee the work of others. We will reinspect the work performed by others if performed within four months from the date of the original inspection. The reinspection must be done within ten working days of request. The reinspection is a visual inspection and if inspection of concealed areas is desired, inspection of work in progress will be necessary. Any guarantees must be received from parties performing repairs. Pestman will note if repairs have been completed or not completed. Pestman does not inspect for nor comment on workmanship of repairs done by others. Interested parties must satisfy themselves as the quality of appearance of work. A charge for a reinspection can be not greater than the original inspection fee for each reinspection.

DAMAGE NOT RECOMMENDED IN THIS REPORT
NOTE: In the event additional or hidden damage is found in the course of repairs, PEST MAN will issue a Supplemental report outlining any additional findings and costs. Pestman shall not be liable for hidden damage discovered in the course of repairs.

Only a licensed pest control firm may apply any chemical for treatment of wood destroying organisms including fungicides (for exception see sec. 8555 of the Business & Professional Code, Division 3).

AUTHORIZATION OF WORK LIMITATION
If PEST MAN IS NOT AUTHORIZED TO PERFORM THE WORK IN THIS REPORT WITHIN FOUR MONTHS OF THE DATE OF THIS INSPECTION, A NEW INSPECTION WILL BE REQUIRED AND A NEW AUTHORIZATION OF WORK WILL BE CREATED. SAID INSPECTION WILL BE PERFORMED AT THE OWNER OR PERSON OF INTEREST’S EXPENSE. COST OF THE REINSPECTION WILL NOT EXCEED THE COST OF THE ORIGINAL INSPECTION.

GUARANTEE
All work performed by this company is guaranteed for a period of one year from the date of completion with the exception of plumbing work, caulking, sealing or linoleum work which is guaranteed for a period of sixty (60) days. Operations are covered by liability insurance, general contractor license, bond, city license and permit. All employees are covered by Worker’s Compensation Insurance.

This inspection is for the purpose of identifying the presence or absence of wood destroying organisms only. PEST MAN does not cite violations of building codes nor perform an all encompassing building inspection. Foundations are inspected below or above adjoining grade levels only and a structural evaluation is not performed or made a part of this Structural Pest Control inspection. It is recommended that persons desiring information regarding electrical, plumbing, structural or general operating systems of this structure hire a qualified building property inspection firm to inspect these areas.

NOTICE: The Structural Pest Control Board encourages competitive business practices among registered companies. Reports on this structure prepared by various registered companies should list the same finding (i.e. termite infestations, termite damage, fungus damage, etc.). However, recommendations to correct these findings may vary from company to company. Therefore, you may wish to seek a second opinion since there may be alternative methods of correcting the findings listed on this report that may be less costly.

MOLD
THIS PROPERTY WAS NOT INSPECTED FOR THE PRESENCE OR ABSENCE OF HEALTH RELATED MOLDS OR FUNGI AND OR INDOOR AIR QUALITY. BY CALIFORNIA LAW, PEST MAN IS NEITHER QUALIFIED, AUTHORIZED NOR LICENSED TO INSPECT FOR HEALTH RELATED MOLDS OR FUNGI. IF INFORMATION IS DESIRED ABOUT THE PRESENCE OR ABSENCE OF HEALTH RELATED MOLDS REGARDING THIS STRUCTURE YOU SHOULD CONTACT AN INDUSTRIAL HYGIENIST. ANY HEALTH RELATED IMPLICATIONS WHICH MAY BE ASSOCIATED WITH THE FINDINGS OR RECOMMENDATIONS (INCLUDING REPAIRS RECOMMENDED) THAT ARE REFLECTED IN THIS REPORT OR CONCERNING INDOOR AIR QUALITY SHOULD BE DIRECTED TOWARDS A QUALIFIED PROFESSIONAL AND OR PROPERLY LICENSED HYGIENIST.

Further, should we discover the presence of asbestos during our inspection of the premises or should our inspection of the premises cause a release of asbestos dust or particles, owner/agent/tenant shall be solely responsible for the cleanup, removal and disposal of the asbestos and the cost thereof. Owner/agent/tenant hereby agrees to waive any and all claims against this company which are in any way related to the presence of asbestos on the premises and further agrees to indemnify and hold this company harmless from any and all claims of any nature asserted by any third party, including this company’s employees and further agrees to indemnify and hold this company harmless from any and all claims of any nature asserted by any third part.
YOU AGREE TO PAY REASONABLE ATTORNEY’S FEES IF SUIT IS REQUIRED BY THIS COMPANY TO ENFORCE ANY TERMS OF THIS CONTRACT TOGETHER WITH THE COSTS OR SUCH ACTION, WHETHER OR NOT SUIT PROCEEDS TO JUDGMENT.

THE TOTAL AMOUNT OF THIS CONTRACT IS DUE AND PAYABLE WITHIN 30 DAYS FROM THE DATE OF COMPLETION OF WORK, UNLESS OTHERWISE SPECIFIED. A FINANCE CHARGE COMPUTED AT A MONTHLY RATE OF 1.5% OF THE UNPAID BALANCE (ANNUAL PERCENTAGE RATE OF 18%) WILL BE ADDED TO ALL ACCOUNTS PAST DUE.

IF THIS REPORT IS USED FOR ESCROW PURPOSES THEN IT IS AGREED THAT THIS INSPECTION REPORT AND COMPLETION IF ANY IS PART OF THE ESCROW TRANSACTION. HOWEVER, IF YOU RECEIVED WRITTEN OR VERBAL INSTRUCTIONS FROM ANY INTERESTED PARTIES INVOLVED IN THIS ESCROW (AGENTS, PRINCIPALS, ETC) TO NOT PAY OUR INVOICE AT CLOSE OF ESCROW, YOU ARE INSTRUCTED BY PESTMAN TERMITE & PEST CONTROL NOT TO USE THESE DOCUMENTS TO SATISFY ANY CONDITIONS OF TERMS OF YOUR ESCROW FOR THE PURPOSES OF CLOSING THE ESCROW. FURTHER, YOU ARE INSTRUCTED TO RETURN ALL OF OUR DOCUMENTS AND THE MOST CURRENT MAILING ADDRESS YOU HAVE ON FILE FOR THE PROPERTY OWNER.
FINDING & RECOMMENDATIONS

SEPARATED REPORT
A separated report has been requested which is defined as SECTION I / SECTION II conditions evident on the date of the inspection. SECTION I contains items where there is evidence of active infestation, infection or condition resulting in or from infestations or infections. SECTION II items are conditions deemed likely to lead to infestations or infections but where no visible evidence of such was found. Further inspection items are defined as recommendations to inspect area(s) which during the original inspection did not allow the inspector to complete his inspection and cannot be defined as SECTION I or SECTION II.

SUBSTRUCTURE
SLAB

STALL SHOWER
2A FINDING: Chips noted in shower bottom. SECTION 2
RECOMMENDATION: Owner/Agent to contact proper LICENSED tradesman for further Inspection to determine the cause of the condition and make necessary repairs.

FOUNDATIONS

PORCHES-STEPS

VENTILATION

ABUTMENTS

ATTIC
NOTE: The tops of ceiling joists in the attic are covered by insulation. This renders the attic area inaccessible for inspection due to a safety hazard. A “visual” inspection from the access opening was made. There is no economically practical method to make the area accessible, however, it may be subject to attack by wood destroying pest or organism. No opinion is rendered concerning the condition in the area at this time

GARAGES

DECK-PATIO

OTHER-INTERIOR
NOTE: This inspection and report covers the visible and accessible areas of the interior of the structure. Areas and walls that are covered or hidden by furniture, appliances, cabinets, storage and/or personal possessions and locked areas are considered inaccessible and not inspected. Pestman assumes no responsibility for infestation, infection, adverse conditions or damage due to inaccessibility or non-disclosure by owner/agent/tenant, and are excluded from any certification.

10A FINDING: Chips and hole noted in tub. SECTION 2
RECOMMENDATION: Owner/Agent to contact proper LICENSED tradesman for further Inspection to determine the cause of the condition and make necessary repairs.

OTHER - EXTERIOR
11A FINDING: Fungus infection and damage noted at sheathing. SECTION 1
RECOMMENDATION: Owner/Agent to contact proper LICENSED tradesman for further Inspection to determine the cause
FINDING & RECOMMENDATIONS

Fungus infection and damage noted at base of door framing. SECTION 1
RECOMMENDATION: Owner/Agent to contact proper LICENSED tradesman for further inspection to determine the cause of the condition and make necessary repairs.
CONDUCTIVE CONDITIONS NOTED AT THE TIME OF THE INSPECTION

It is important that all parties reading this report understand that this report covers the accessible areas of the structure only. There are many inaccessible areas in a structure (see inaccessible areas on page 2 of this report). PEST MAN does not warrant or make any representation as to the interior or hollow spaces of walls or ceiling. These areas are considered inaccessible. Further inspection recommendations are made where there are visible signs of infestations or infections. Otherwise, the areas as noted on page two of this report are considered inaccessible and were not inspected or included in this report.

No representation is made by PEST MAN regarding the roof covering or roofing components on this home. We are not licensed roofers and are not qualified to inspect these areas as a termite operator. We recommend that the owner or party of interest engage the services of a licensed roofing contractor for further recommendations and/or repairs as necessary.
OCCUPANTS CHEMICAL NOTICE

PEST MAN will use pesticide chemical(s) specified below for the control of wood destroying pests or organisms in locations identified in the Structural Pest Control report as indicated above.

(1) The pest (s) to be controlled:

___ SUBTERRANEAN TERMITES  ___ FUNGUS or DRY ROT
___ DRY-WOOD TERMITES  ___ OTHER

(2) The pesticide (s) proposed to be used and the active ingredient(s).

   A. Masterline: Active ingredients: Bifenthrin 7.9%
   B. TIM-BOR: Active Ingredients: Disodium Octaborate Totrahydrate; 98%
   C. TERMIDOR: Active Ingredients: Fipronil:
   D. BIFEN I/T Active Ingredients: Bifenthrin
   E. VIKANE: Active Ingredients: Sulfuryl Fluoride
   F. PREMISE: Active ingr: Imidacloprid,nitro-2-imidazolidinimine 75.0%

"State law requires that you be given the following information:

CAUTION-PESTICIDES ARE TOXIC CHEMICALS. Structural Pest Control Operators are licensed and regulated by the Structural Pest Control Board, and apply pesticides which are registered and approved for use by the California Department of Food and Agriculture and the United States Environmental Protection Agency. Registration is granted when The State finds that based on existing scientific evidence there are no appreciable risks if proper use conditions are followed or that the risks are outweighed by the benefits. The degree of risk depends upon the degree of exposure, so exposure should be minimized.

"If within 24 hours following application you experience symptoms similar to common personal illness comparable to the flu, contact your physician or poison control center and your pest operator immediately."

For further information, contact any of the following:

PESTMAN TERMITE & PEST CONTROL .................................................................559-732-7378
County Health Department....................................................
County Agriculture Commissioner. Tulare 684-3350, Fresno 600-7510, Kings 852-2830
Poison Control Center..............................................................(800) 876-4766
Structural Pest Control Mailing Address
2005 Evergreen st, #1500 Sacramento, CA 95815.................... (916) 263-2540

Persons with respiratory or allergic condition, or other who may be concerned about their health relative to this chemical treat, should contact their physician concerning occupancy during and after chemical treatment prior to signing this NOTICE.

NO CHEMICAL APPLICATION WILL BE PERFORMED UNTIL SUCH TIME THAT THIS NOTICE IS RETURNED.
HAVING READ THE INSTRUCTIONS, I, THE UNDERSIGNED, WILL ACCEPT RESPONSIBILITY FOR ALL THE AFOREMENTIONED.

____________________________________________________
OWNER/OCCUPANT DATE

____________________________________________________

CHEMICAL NOTICE

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PestMan Termite & Pest Control -