сотралу на	ime		
Address	5		
CITY	ST	Zip	
РН	Business License #		
Address of Treatment		Permit Numb	er
Type of Dwelling		Date/Time of Application	
Method of Termite Prevention Treatme	nt – soil barrier, w	ood treatment, bait	systems, other (describe)
Pesticide Used or Bait System Installed			
Date of Final Treatment			

## Bait System Only:

Consumer Services."

"A signed contract has been executed between the owner of the building and the Termiticide Contractor assuring the Installation, Maintenance and Monitoring of the Bait System for a minimum of 5 years from the issuance of the Certificate of Occupancy. A copy of this Contract was on file with the Building Official prior to pouring the slab/mono-slab and has not been modified."

Authorized Signer

Termiticide Contractor

Date (09/24)

