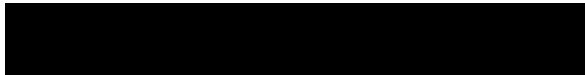


WOOD DESTROYING ORGANISM

APR 02, 2020



CLIENT



Structure(s) on Property Inspected: Single Family Residence Only
Inspection and Report Requested By: Safeline Home Inspections LLC
Report sent to Reqeester and to:

INSPECTED BY



COREY RICHARDSON



License : JB279986

ID Card : JF180309

1-800-991-9095

info@ameripropest.com





NICOLE "NIKKI" FRIED
COMMISSIONER

Florida Department of Agriculture and Consumer Services
Division of Agricultural Environment Services

WOOD-DESTROYING ORGANISMS INSPECTION REPORT

Rule 5E-14.142, F.A.C.
Telephone Number (850) 617-7996

SECTION 1- GENERAL INFORMATION

Inspection Company:
AmeriPro Pest Control
Inspection Company Name
Business License Number: JB279986
3131 St Johns Bluff Rd S
Company Address
Phone Number: 1-800-991-9095
JACKSONVILLE, FL 32246
Company City, State and Zip Code
Date of Inspection: 04/02/2020
Inspector's Name and Identification Card Number: COREY RICHARDSON
Print Name
JF180309
ID Card Number
Address of Property Inspected
Structure(s) on Property Inspected Single Family Residence Only
Inspection and Report requested by Safeline Home Inspections LLC
(Name and contact information)
Report Sent to Requester and to:
(Name and contact information if different from above)

SECTION 2 - INSPECTION FINDINGS- CONSUMERS SHOULD READ THIS SECTION CAREFULLY

THIS REPORT IS MADE ON THE BASIS OF WHAT WAS VISIBLE AND READILY ACCESSIBLE AT THE TIME OF INSPECTION AND DOES NOT CONSTITUTE A GUARANTEE OF THE ABSENCE OF WOOD-DESTROYING ORGANISMS (WDOs) OR DAMAGE OR OTHER EVIDENCE UNLESS THIS REPORT SPECIFICALLY STATES HEREIN THE EXTENT OF SUCH GUARANTEE.

This report does not cover areas such as, but not limited to, those that are enclosed or inaccessible, areas concealed by wall coverings, floor coverings, furniture, equipment, stored articles, insulation, or any portion of the structure in which inspection would necessitate removing or defacing any part of the structure. This property was not inspected for any fungi other than wood-decaying fungi, and no opinion on health related effects or indoor air quality is provided or rendered by this report. Individuals licensed to perform pest control are not required, authorized or licensed to inspect or report for any fungi other than wood-destroying fungi, nor to report or comment on health or indoor air quality issues related to any fungi. Persons concerned about these issues should consult with a certified industrial hygienist or other person trained and qualified to render such opinions. **A wood-destroying organism (WDO) means an arthropod or plant life which damages and can reinfest seasoned wood in a structure namely, termites, powder post beetles, old house borers, and wood-decaying fungi.**

NOTE: This is NOT a structural damage report. It should be understood that there may be damage, including possible hidden damage present. FURTHER INVESTIGATION BY QUALIFIED EXPERTS OF THE BUILDING TRADE SHOULD BE MADE TO DETERMINE THE STRUCTURAL SOUNDNESS OF THE PROPERTY.

Based on a visual inspection of accessible areas, the following findings were observed:
(See Page 2, Section 3 to determine which areas of the inspected structure(s) may have been inaccessible.)

A. ☒ NO visible signs of WDO(s) (live, evidence, or damage observed)
B. ☐ VISIBLE evidence of WDO(s) was observed as follows:
☐ 1. LIVE WDO(s) N/A
(Common Name of Organism and Location - use additional page, if needed)
N/A
☐ 2. EVIDENCE of WDO(s) (dead wood- destroying insects, insect parts, frass, shelter tubes, exit holes or other evidence)
N/A
(Common Name, Description, and Location - Describe Evidence - use additional page if needed)
N/A
☐ 3. DAMAGE caused by WDO(s) was observed and noted as follows:
N/A
(Common Name, Description and Location of all visible damage - Describe damage - use additional page if necessary)
N/A

SECTION 3 - OBSTRUCTIONS AND INACCESSIBLE AREAS: The following areas of the structure(s) inspected were obstructed or inaccessible. NO INFORMATION on the status of wood-destroying organisms or damage from wood-destroying organisms in these areas is provided in this report.

In addition to those areas provided in consumer information on Page 1, Section 2; the following specific areas were not visible and/or accessible for inspection. The descriptions and reasons for the inaccessibility are stated below:

<input checked="" type="checkbox"/> ATTIC	SPECIFIC AREAS: <u>Wood framing members covered by insulation in the attic throughout. The master bedroom, laundry room, family room, kitchen, dining room, and front bedroom attic.</u>
	REASON: <u>Insulation blocks view of wood members. Only the garage attic and the back bedroom attic access were accessible to be inspected. Attic area inaccessible due to low headroom and high ceilings.</u>
<input type="checkbox"/> INTERIOR	SPECIFIC AREAS: <u>N/A</u>
	REASON: <u>N/A</u>
<input checked="" type="checkbox"/> EXTERIOR	SPECIFIC AREAS: <u>Exterior wall siding on the East side of the garage wall.</u>
	REASON: <u>Vegetation blocks view of exterior wall siding, foundation, and trim.</u>
<input type="checkbox"/> CRAWLSPACE	SPECIFIC AREAS: <u>N/A</u>
	REASON: <u>N/A</u>
<input type="checkbox"/> OTHER	SPECIFIC AREAS: <u>N/A</u>
	REASON: <u>N/A</u>

SECTION 4 - NOTICE OF INSPECTION AND TREATMENT INFORMATION

EVIDENCE of previous treatment observed: ☒ Yes ☐ No If Yes, the structure exhibits evidence of previous treatment. List what was observed:
Sticker of prior termite company fixed to electric panel. Refer to attached photograph.
(State what visible evidence was observed to suggest possible previous treatment - use additional page if necessary)

NOTE: The inspecting company can give no assurances with regard to work done by other companies. The company that performed the treatment should be contacted for information on treatment history and any warranty or service agreement which may be in place.

A Notice of inspection has been affixed to the structure at: Electrical Panel

Types of Termites: N/A

This Company has treated the structure(s) at the time of inspection ☐ YES ☒ NO

If YES, Common name of organism treated: N/A

Name of pesticide used: N/A Terms and Conditions of Treatment: N/A

Method of treatment: ☐ Whole Structure ☐ Spot Treatment N/A

Specify Treatment Notice Location: N/A

SECTION 5 - COMMENTS AND FINANCIAL DISCLOSURE

Comments :

Recommend Trim or remove any plants that are in contact or proximity to home to eliminate pathways of moisture intrusion or wood destroying insects.
Recommend 24" clearance between the home and any shrubbery.

(Use additional pages, if necessary)

Neither the Company (Licensee) nor the inspector has any financial interest in the property inspected or is associated in any way in the transaction or with any party other than for inspection purposes.

Signature of License or Agent: Craig R. H.

Date: 4/2/2020

Address of Property Inspected: [REDACTED]

Inspection Date: 04/02/2020

THIS IS PAGE TWO OF A TWO PAGE REPORT



North



House number



East



South



West



Conducive condition



Conducive condition



Conducive condition



Conducive condition



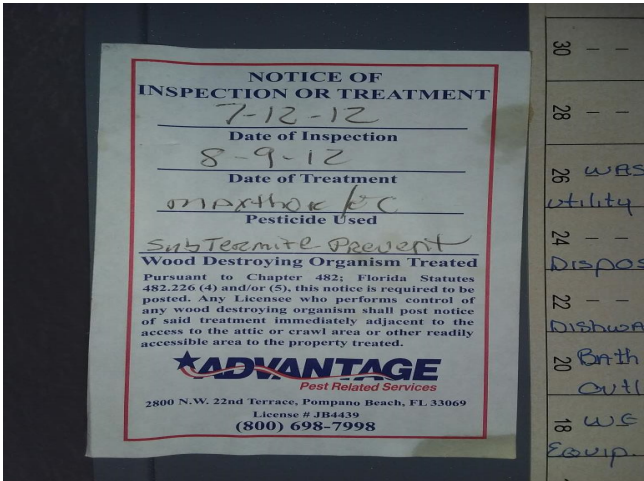
Conducive condition



Sticker on panel



WDO sticker



Previous treatment sticker