

## Pest & Termite Information

Property information is available online at [ScottsdaleHomeAuction.com](http://ScottsdaleHomeAuction.com).

The below information includes information on pest and termite service at the property. Such information includes:

- Termite inspection on January 19, 2018 – no visible evidence from termite activity found
- Termite warranty renewal receipt Arrow Exterminators for \$328.00 on March 14, 2017
- Termite warranty info – Sentricon Service Agreement

Note that the current termite warranty is valid through May, 2018 and can be renewed at the Buyer's option with Arrow Exterminators.



7155 W. Campo Bello Dr. Suite #B160  
Glendale, AZ 85308  
Phone: 602-569-3111 Fax: 602-795-7413  
<http://www.ptotectiontermitecontrol.com>  
ProtectionTermite@gmail.com  
License# 8362

**Cover Page**  
Date : 01/19/2018  
Customer Number: 96665  
Work Order Number: 131966

7800 E Boulders Pwky #4  
Scottsdale, AZ 85266



Inspector Steven Worley

Inspection Date

01/19/2018

Thank you for choosing Protection Termite Control to perform your service.

In this document you will find:

**Arizona Official State Termite Inspection Report (WDIIR)**

**One Year Inspection Warranty**

If you have any questions, please contact our office at 602-569-3111.

Thank You,

Steven Worley / Lic #: 160978



**Arizona Department of Agriculture  
Office of Pest Management  
WOOD DESTROYING INSECT INSPECTION REPORT**

**1688 W. Adams, Phoenix AZ 85007  
(602) 255-3664 opm.azda.gov**

1A. VA/HUD/FHA CASE #	DATE OF INSPECTION 01/19/2018
1B. <input checked="" type="checkbox"/> ORIGINAL REPORT <input type="checkbox"/> SUPPLEMENTAL REPORT	1D. WDIIR # 131966
1C. <input checked="" type="checkbox"/> SALE <input type="checkbox"/> REFINANCE <input type="checkbox"/> OTHER	1E. TARF #

**NOTE: Pursuant to: ARS § 32-2333 (A) This form must be completed only by a Certified Applicator.**

**2. READ CAREFULLY PRIOR TO COMPLETING THIS OFFICE OF PEST MANAGEMENT (OPM) FORM**

- The VA or HUD/FHA case number shall be inserted in Item 1A by the lender or by the pest control company.
- Areas that were inaccessible or obstructed (Item 7) may include, but are not limited to, wall coverings, fixed ceilings, floor coverings, furniture, or stored articles. In Item 7, the Inspector shall list those obstructions or areas which inhibited the inspection.
- Item 8A alone is checked when evidence/insects are found but no control measures are performed. Items 8A and 8C are checked when evidence/insects are found AND control measures are performed.
- When visible evidence is observed, wood-destroying insects causing such evidence shall be listed in Item 8A and the visible damage resulting from such infestation shall be noted in Item 8D.
- When treatment is indicated in Item 8C, the insects treated shall be named and the date of treatment indicated. The application method and chemicals used shall be entered in Item 10. Proper control measures may include issuance of a warranty. Warranty information shall also be entered in Item 10. (*Proper control measures are those which are allowed by OPM Statute/Rule, or the label for the chemical used*).
- Visible evidence of conditions conducive to infestation from wood-destroying insects shall be reported in Items 15-18 on the second page of this form, (e.g., earth-wood contact, faulty grade, insufficient ventilation, etc.).
- All supplemental reports shall be completed within (30) days of the date of the original report.

3A. NAME OF INSPECTION COMPANY Protection Termite Control		5A. NAME OF PROPERTY OWNER/SELLER Ed & Judy Rosenthal
3B. ADDRESS OF INSPECTION COMPANY (Street, City, ZIP) 7155 W. Campo Bello Dr. Suite #B160, Glendale, AZ, 85308		5B. PROPERTY ADDRESS (Street, City, ZIP) 7800 E Boulders Pwky #4, Scottsdale, AZ, 85266
3C. TELEPHONE NUMBER (Include Area Code) 602-569-3111	4. BUSINESS LICENSE # 8362	6A. INSPECTED STRUCTURES House

**6B. LIST ALL UN-INSPECTED STRUCTURES**

None

**7. THIS INSPECTION DOES NOT INCLUDE THE FOLLOWING LISTED AREAS WHICH ARE OBSTRUCTED OR INACCESSIBLE.** (See also Item 19, page 2.)

Under & behind all flooring, wall & window coverings, inside walls, and behind bath & kitchen back splashes. Also see page 2.

**8. BASED ON THE INSPECTOR'S VISUAL INSPECTION OF THE READILY ACCESSIBLE AREAS OF THE PROPERTY** (See Section (11) before completing):

- A. Visible evidence of wood-destroying insects was observed.  
Describe evidence observed: \_\_\_\_\_  
Type of Wood-Destroying Insects observed: \_\_\_\_\_
- B. No visible evidence of infestation from wood-destroying insects was observed.
- C. Visible evidence of infestation as noted in 8A. Proper control measures were performed on (date): \_\_\_\_\_
- D. Visible damage due to \_\_\_\_\_ was observed in the following areas: \_\_\_\_\_
- E. Visible evidence of previous treatment was observed. List evidence. (See also Item 20, page 2.): \_\_\_\_\_

**9. DAMAGE OBSERVED, IF ANY**

- A. Will be or has been corrected by this company.
- B. Will not be corrected by this company.
- C. It is recommended that noted damage be evaluated by a licensed structural contractor for any necessary repairs to be made.

**10. ADDITIONAL COMMENTS (ALSO SEE PAGE 2.)**

(Number of additional attachments to this report.) \_\_\_\_\_ Page(s)

**11. STATEMENT OF INSPECTOR**

- A.  The inspection covered the readily accessible areas of the above listed structures, including attics and crawl spaces which permitted entry.
- B.  Special attention was given to those areas which experience has shown to be particularly susceptible to attack by wood-destroying insects.
- C.  Non-destructive probing and/or sounding of those areas and other visible accessible wood members showing evidence of infestation was performed.
- D.  The inspection did not include areas which were obstructed or inaccessible at the time of inspection.
- E.  Neither I, nor the company for which I am acting, have had, presently have, or contemplate having any interest in this property.  
I do further state that neither I, nor the company for which I am acting, is associated in any way with any party to this transaction.

12A. SIGNATURE OF INSPECTOR <i>Stanley</i>	12B. INSPECTOR'S LICENSE NUMBER 160978	12C. DATE 01/19/2018
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**STATEMENT OF PURCHASER**

**I HAVE RECEIVED THE ORIGINAL, OR A LEGIBLE COPY, OF THIS FORM AND HAVE READ PAGE (1, 2, & 3) OF THIS FORM.  
I UNDERSTAND THAT THIS IS NOT A STRUCTURAL DAMAGE, FUNGI/MOLD REPORT, OR A WARRANTY AS TO THE ABSENCE OF WOOD-DESTROYING INSECTS AND I CAN CONSIDER  
ASSESSMENT BY A LICENSED STRUCTURAL CONTRACTOR OR FUNGI/MOLD INSPECTOR FOR ANY STRUCTURAL DAMAGE OR FUNGI/MOLD CONCERN.**

13. SIGNATURE OF PURCHASER	14. DATE
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<b>PROPERTY NAME/ADDRESS</b> 7800 E Boulders Pwky #4, Scottsdale, AZ, 85266	<b>DATE OF INSPECTION</b> 01/19/2018
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**AT THE TIME OF THE INSPECTION THE PROPERTY WAS:**     Vacant     Occupied     Unfurnished     Furnished

**CONDITIONS CONDUCTIVE TO INFESTATION**

**15. WOOD TO EARTH CONTACT (EC)**     YES     NO    *(If YES, check mark and explain conditions conducive)*

<input type="checkbox"/> Fence Abutting Structure	<input type="checkbox"/> Pier Posts	<input checked="" type="checkbox"/> Plants/Trees Contacting Structure
<input type="checkbox"/> Concrete Form Boards	<input type="checkbox"/> Porch Stairs	<input type="checkbox"/> Other _____
<input type="checkbox"/> Porch Post	<input type="checkbox"/> Trellis	

**Comments:**  
see pictures and diagram

**16. EXCESSIVE CELLULOSE DEBRIS (CD)**     YES     NO    *(If YES, check mark and explain conditions conducive)*

**Comments:**

**17. FAULTY GRADES (FG)**     YES     NO    *(If YES, check mark and explain conditions conducive)*

<input checked="" type="checkbox"/> Evidence of surface water draining toward house	<input checked="" type="checkbox"/> Stucco at or below grade
<input type="checkbox"/> Floor level or planters at or below grade	<input type="checkbox"/> Joists in crawl space less than 18" above grade
<input type="checkbox"/> Wood siding below grade	<input type="checkbox"/> Other _____

**Comments:**  
FG stucco to grade by Builders design see diagram and pictures for faulty grade

**18. EXCESSIVE MOISTURE (EM)**     YES     NO    *(If YES, check mark and explain conditions conducive)*

<input type="checkbox"/> Standing Water	<input checked="" type="checkbox"/> Water Damage	<input type="checkbox"/> Bath/Shower/Toilet Leaking	<input type="checkbox"/> Inadequate Ventilation
<input type="checkbox"/> Sprinklers Hitting Structure	<input checked="" type="checkbox"/> Water Stain	<input checked="" type="checkbox"/> Plumbing Leaks	<input type="checkbox"/> Other _____
<input type="checkbox"/> Crawl Space/Water Leaking	<input type="checkbox"/> Improper Condensate Drainage	<input type="checkbox"/> Attic/Roof Leak	

**Comments:**  
Per state rules and regulations, the excessive moisture box must be marked yes if any water stains or damage is on the home, old or new.-- See Diagram and picture's

**19. INACCESSIBLE AREAS (IA)**     YES     NO    *(If YES, check mark and explain)*

<input checked="" type="checkbox"/> Attic – All	<input checked="" type="checkbox"/> Floors	<input type="checkbox"/> Sub/Crawl Space Area -- Clearance
<input type="checkbox"/> Attic – Joists	<input checked="" type="checkbox"/> Wall Interiors	<input type="checkbox"/> Sub Area/Crawl Space No Access
<input type="checkbox"/> Attic – Partial	<input type="checkbox"/> Enclosed Stairwell	<input checked="" type="checkbox"/> Areas Obstructed By Furniture Or Stored Articles
<input checked="" type="checkbox"/> Plumbing Traps	<input type="checkbox"/> Dropped Ceilings	<input type="checkbox"/> Other _____

**Comments:**  
ATTIC OBSTRUCTED - Flat roof - no access; PLUMBING TRAPS - None; FLOORS - Floor Coverings; WALLS - Covered; AREAS OBSTRUCTED - Behind furniture items throughout home; AREAS OBSTRUCTED - Under and Behind Cabinets and Appliances;

**20. EVIDENCE OF PREVIOUS TREATMENT**

**BY ANOTHER COMPANY:** While evidence of previous treatment does exist, it is impossible for the inspecting company to ascertain if such treatment was properly performed. Further investigation is left to the Buyer's discretion to determine if such treatment was done properly and if a valid warranty exists against the target pest of such treatment.

**BY THE INSPECTING COMPANY:** Previous treatment is recorded for this property. At the Buyer's discretion, treatment records can be viewed at the inspecting company's local office with the property owner's permission.

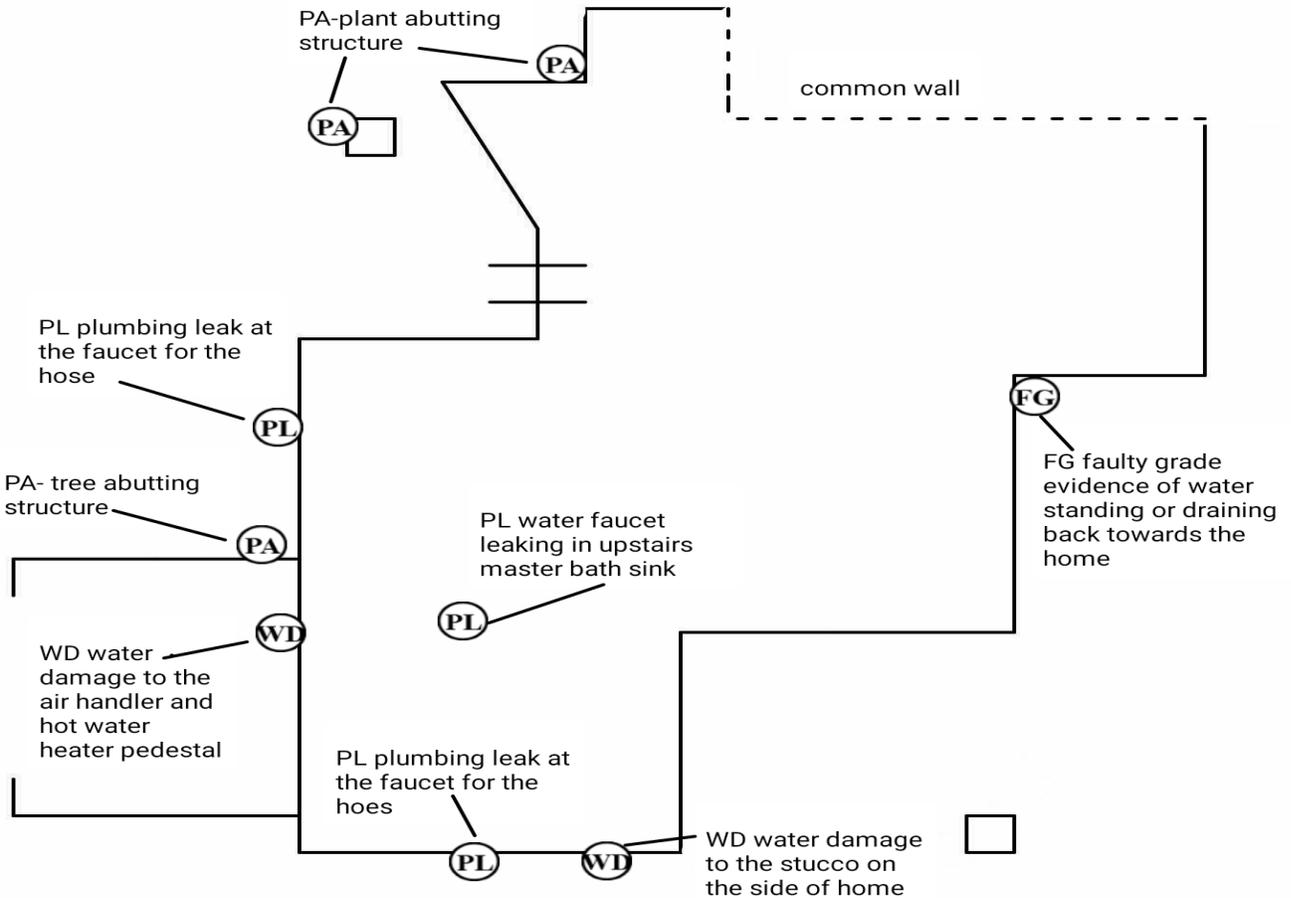
Account Number: \_\_\_\_\_ Date of Initial Treatment: \_\_\_\_\_ Target Pest: \_\_\_\_\_

Warranty Expiration Date: \_\_\_\_\_ Other: \_\_\_\_\_

**Pest Control Inspector's Additional Comments**

- Occupied Home: Home was occupied at time of inspection. Some areas on this property were inaccessible at the time of inspection due to miscellaneous stored items, furniture, wall art and mirrors. This includes but is not limited to walls, inside walls, under floors, inside and under cabinets, under sinks and under rugs. Areas around home and garage also could be inaccessible because if miscellaneous stored items, plants and trees. The inspector in general, does not move any personal belongings, furnishing, carpet, rugs and appliances in or around home. All areas inaccessible at the time of inspection are excluded from inspection. The client should be aware that when miscellaneous items, plants, trees and furniture is moved or remodeling takes place, damage and/or problems may be found.;

## GRAPH OF STRUCTURE(S)



This structure has IA, please see comments on page 2 box 19 of AZ WDIIR Form

(Note: Graph Not To Scale)

**PURSUANT TO: R4-29-501 (E)(5)(o) THE INSPECTOR MUST COMPLETE THE GRAPH ON PAGE (3) AND CHECK (✓) MARKED BELOW FOR ANY ITEMS WHICH ARE NOTED ON PAGES (1) AND (2)**

	CODE	SEE GRAPH PAGE (3)		CODE	SEE GRAPH PAGE (3)		CODE	SEE GRAPH PAGE (3)	
✓	SU	Subterranean Termites		OW	Other Wood Destroying Insects (*)	X	OB	Obstructions	
	DR	Drywood Termites	X	FG	Faulty Grade	X	IA	Inaccessible Areas	
	DA	Dampwood Termites	X	EC	Wood To Earth Contact		IV	Inadequate Ventilation	
	BE	Wood Destroying Beetles		CD	Cellulose Debris	X	PL	Plumbing Leaks	
	CA	Carpenter Ants	X	PA	Plantings Abutting Structure		SP	Sprinkler Hitting Structure	
								WD	Water Damage
								WS	Water Stains
								RL	Roof Leaks
								EM	Excessive Moisture
								FI	Further Inspection Needed
(*) Other Wood Destroying Insects									



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**Picture Page**  
Date : 01/19/2018  
Customer Number: 96665  
Work Order Number: 131966

**7800 E Boulders Pwky #4, Scottsdale, AZ 85266**



PA- plant abutting structure



PA- plant abutting structure



PA-tree abutting structure



FG water drains and or stands against the structure



WD water damage to the stucco or sprinkler heads hit it



Ws water stains on the air handler and hot water tank pedestals



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**Picture Page**  
Date : 01/19/2018  
Customer Number: 96665  
Work Order Number: 131966

7800 E Boulders Pwky #4, Scottsdale, AZ 85266



OB--personal items stored in garage



OB--personal items stored in garage





# Protection Termite Control



7155 W. Campo Bello Dr. Suite #B160  
Glendale, AZ 85308  
Ph: 602-569-3111 F: 602-795-7413  
Email: ProtectionTermite@gmail.com  
License # 8362

## One Year Inspection Warranty

Protection Termite Control, LLC. completed a thorough inspection for Ed & Judy Rosenthal at 7800 E Boulders Pwky #4, Scottsdale, AZ 85266 on 01/19/2018. At the time of the inspection, there were no visible signs of subterranean termites. Evidence of termites include markings, stains, tubes, pinholes, and damage. This warranty does not apply if any evidence found on the property is deemed old or new. Should live infestation be detected on the structure within 1 year of the original inspection, Protection Termite Control, LLC. will spot treat the infested area at no cost to the buyer stated above. At no time is Protection Termite Control, LLC. obligated to perform a full treatment. Should any evidence of subterranean termites be found in areas noted as inaccessible on the report, this warranty will not apply. There are no other warranties expressed or implied other than those stated above. Warranties are not transferable.

All warranties are void if payment for inspection is not received by buyer or at close of

escrow. If you are interested in renewing this warranty, our prices start at \$55 for 1 year or \$190 for 4 years. Call our office to find out your price.

Protection Termite Control  
7155 W. Campo Bello Dr. Suite #B160  
Glendale, AZ 85308

You may also call our office at 602-569-3111 with a VISA, MasterCard, or Discover by Jan 19, 2019 Your warranty will be mailed to the address you provide. Thank you.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address/City/Zip: \_\_\_\_\_

RE: 7800 E Boulders Pwky #4, Scottsdale, AZ 85266

Please contact me to set a free annual inspection.



## Credit Card Receipt

**Company Information:**

Arrow Exterminators, Inc.  
301 West Deer Valley Rd., Suite 3  
Phoenix, AZ 85027  
623-434-8586

**Customer Information:**

Bill-To Account: 334001570  
John V Genova  
Po Box 2903  
Edwards, CO 81632-2903  
713-205-3720

Your payment for \$328.00 to Arrow Exterminators, Inc. has been processed.

## Payment Details

<b>Payment Date:</b>	3/14/2017 10:19:16 AM	<b>Credit Card #:</b>	*****0081
<b>Amount:</b>	\$328.00	<b>Card Type:</b>	Visa
<b>Authorization:</b>	014299	<b>Cardholder Name:</b>	arrabiata

## Invoices Paid

*This payment was not applied to any invoices.*

Additional details of your payment can be viewed on our website at <https://caa.arrowexterminators.com/>. If you did not authorize this payment, please contact one of our representatives by calling 623-434-8586.



Arrow Exterminators, Inc.  
301 West Deer Valley Rd., Suite 3  
Phoenix, AZ 85027  
623-434-8586

### Service Inspection Report

**ORDER #: 28014067**

WORK DATE: 3/23/17

**BILL-TO 334001570**

John V Genova  
Po Box 2903  
Edwards, CO 81632-2903  
Email: jvgenova@sbcglobal.net

Phone: 713-205-3720  
Alt. Phone: 214-373-1873

**LOCATION 334001570**

John V Genova  
7800 E Boulders Pkwy Unit 4  
Scottsdale, AZ 85266-1230  
Email: jvgenova@sbcglobal.net

Phone: 480-595-5300  
Alt. Phone: 713-205-3720

**Time In:** 3/23/17 1:00 PM  
**Time Out:** 3/23/17 1:00 PM

**Customer Signature**

**Technician Signature**

James Tago  
**License #:**

Purchase Order	Terms	Service Description	Quantity
None	DUE UPON RECEIPT	Sentricon Guarantee/Coverage	1.00

**GENERAL COMMENTS / INSTRUCTIONS**

No visible signs of termites activity

**AREA COMMENTS**

*None Noted.*

**PRODUCTS APPLIED**

*None Noted.*

**CUSTOMER INSTRUCTIONS & PRECAUTIONS**

Contact Treated Areas - Do not allow unprotected persons, children, or pets to touch, enter, or replace items or bedding, to contact or enter treated area(s) until dry.

Ventilation/Re-Occupying - Vacate & keep area(s) closed up to 30 minutes after treatment, then ventilate area(s) for up to 2 hours before re-occupying.

Equipment/Processing/Food - Thoroughly wash dishes, utensils, food preparation/processing equipment & surfaces with an effective cleansing compound & rinse with clean water, if not removed or covered during a treatment. The area should be odor free before food products are placed in the area.

Exterior Applications (baits) - Do not allow grazing of feed, lawn, or sod clippings by livestock after bait applications.

Do not burn treated firewood for 1 month after treatment.

We value your business and your continued loyalty and as your Service Professional, I am proud to go Beyond the Call and provide you with uncompromised service. You may notice a slight increase with the cost of your ongoing service. We continue to manage our costs to keep our prices as low as possible, however it was necessary for us to implement this nominal increase at this time. Thank you for trusting us to protect your home and family.



04/09 12-1pm

RENEWAL MONTH / YEAR: 05-12  
MAPCODE: 66-12  
FORM II ON FILE: 66 KV/173

301 West Deer Valley Rd., Suite  
Phoenix, AZ 85027  
623-434-8586

RENEWAL SERVICE SLIP / INVOICE  
GUARANTEE TYPE / ACCOUNT #

PLEASE PAY FROM THIS INVOICE  
AMOUNT NOW DUE

SERVICE ADDRESS  
John V Genova  
7800 E Boulders Pkwy Unit 4  
Scottsdale, AZ 85266-1230  
SVC PH: 480-595-5301  
RT# RENEWALS  
BILL TO: 710 285 3728

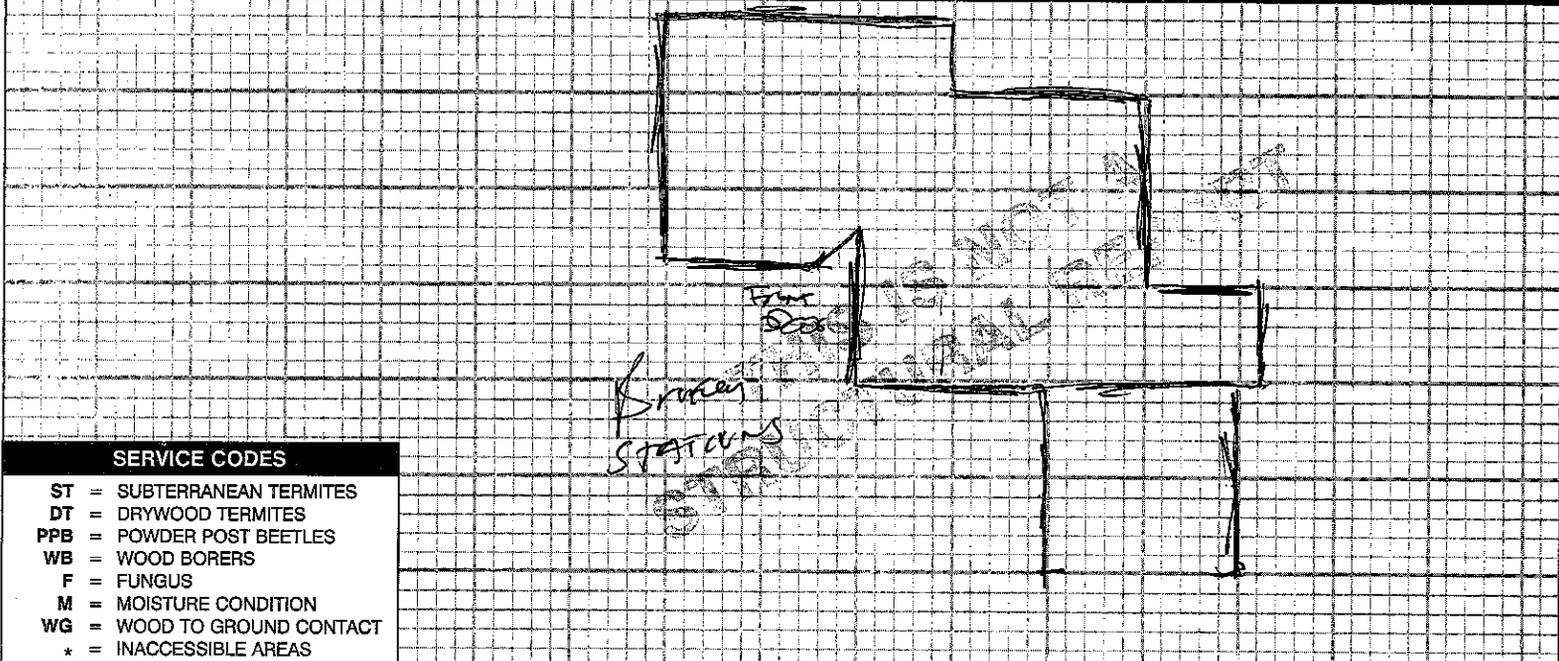
SEN RENEW R/T  
34221570/17629670  
 RECEIVED AT INSPECTION: \$ \_\_\_\_\_  
CHECK ONE:  PREPAID  CASH  CHECK  
CHECK ONE:  VISA  MASTERCARD  DISCOVER  AMEX

303.00 + 0.00 = 303.00

STEPS Services:

GENERAL INSPECTION REPORT OF FINDINGS AND/OR TREATMENT

INSPECTION GRAPH



- SERVICE CODES
- ST = SUBTERRANEAN TERMITES
  - DT = DRYWOOD TERMITES
  - PPB = POWDER POST BEETLES
  - WB = WOOD BORERS
  - F = FUNGUS
  - M = MOISTURE CONDITION
  - WG = WOOD TO GROUND CONTACT
  - \* = INACCESSIBLE AREAS

MESSAGES/CONTACTS  
12:05 PM  
12:20 PM

FINDINGS	YES	NO
• INACCESSIBLE AREAS	X	
THE FOLLOWING AREAS WERE INACCESSIBLE FOR VIEWING AND SOUNDING. THEREFORE NO REPORT CAN BE MADE IN REGARD TO THE PRESENCE OR ABSENCE OF INFESTATION/DAMAGE.		
Behind walls		

AREAS OF INSPECTION	YES	NO
EXTERIOR	X	
INTERIOR	X	
GARAGE	X	
CRAWL SPACE		X
BASEMENT		
ATTIC		

COMMENTS: No new visible termite activity.  
Thank you!

I have verified the Sentricon System is intact and providing termite protection for your structure.

PAYMENT: When a check is provided as payment, the Customer agrees that the COMPANY is authorized to use check information to make a one-time electronic funds transfer from Customer's account or to process the payment as a check transaction. For inquiries, please call 1-888-80-ARROW

PLEASE NOTE: CUSTOMER MUST NOTIFY ARROW IN WRITING OF ANY ADDITIONS OR MODIFICATIONS TO STRUCTURE  
THE ABOVE WORK HAS BEEN SATISFACTORILY PERFORMED

DATE: 04/09/2012

CUSTOMER SIGNATURE

SERVICE PROFESSIONAL

See customer information on reverse side  
WHITE - OFFICE COPY YELLOW - CUSTOMER COPY



A DIVISION OF ARROW EXTERMINATORS

SENTRICON SERVICE AGREEMENT
SUBTERRANEAN TERMITE LIMITED RETREATMENT GUARANTEE

This contract provides for retreatment of a structure but does not provide for the repair of damages caused by wood destroying organisms.

ACCOUNT NAME: Jerry Karel
SERVICE ADDRESS: 7800 #4 5 green Scottsdale Az 85262
CITY: Scottsdale STATE: AZ ZIP CODE: 85262
SERVICE PHONE: 480-988-0926

BILLING NAME: Same
BILLING ADDRESS:
CITY: STATE: ZIP CODE:
BILLING PHONE: HOME OFFICE

TENANT/PERSON TO CONTACT HOME PHONE OFFICE PHONE

NEW HOME OWNER HOME PHONE OFFICE PHONE

- TYPE OF STRUCTURE: RESIDENTIAL
STRUCTURES FOR SERVICE: MAIN DWELLING
LOCATION OF NOTICE OF SERVICE: OTHER: Front Door
PURPOSE OF SERVICE: EXISTING INFESTATION

INITIAL INVESTMENT
Initial Cost: \$1000
TOTAL INITIAL COST: \$1000
Down Payment: \$0

METHOD OF PAYMENT
BALANCE OF: \$1000
Due Upon Completion
Renewal Maintenance Fee: \$230
Renewal Frequency: Annually
Commencing On: 4/10/02

UPON RECEIVING FULL PAYMENT AND COMPLETING THE INITIAL SERVICE THE COMPANY WILL PROVIDE A LIMITED RETREATMENT GUARANTEE FOR SUBTERRANEAN TERMITES (EXCLUDING FORMOSAN TERMITES) AS DESCRIBED IN THE PROVISIONS, TERMS AND CONDITIONS SET FORTH ON THE FRONT AND BACK OF THIS AGREEMENT.

SERVICE PROVISIONS

CASEY'S EXTERMINATORS (The Company) is authorized by Dow AgroSciences, to install the Sentricon Colony Elimination System and conduct associated monitoring and treatment protocols for customer.

The Customer appreciates that subterranean termite control is not immediate. Specifically, control and/or colony elimination may take several months.

The Company shall provide the following termite control services to Customer under this agreement:

- 1. Initial inspection of applicable structures and grounds and installation of inground monitoring bait stations around perimeter of structure at the Company's discretion.
2. Routine monitoring of bait stations by the Company service technicians, commencing with the installation of the system.
3. Application of Recruit termiticide through bait tube insertions in bait stations upon confirmation of subterranean termite presence at monitoring sites.
4. Inform the Customer of any new or increased termite activity noted at any of the monitoring bait stations during any of the routine inspections.

As compensation for services rendered or to be rendered under this agreement, the Customer shall pay the Company an initial installation fee and monitoring fees, as specified, upon signing this agreement.

Customer agrees not to move, open, handle or damage Sentricon stations, bait tube or any other parts of the system. Tampering with such components may compromise the efficacy of the system and shall constitute a basis for terminating this agreement.

The limited guarantee in this agreement is in lieu of all other guarantees and warranties, expressed and implied, including the warranties of merchantability and fitness for a particular purpose.

CASEY'S EXTERMINATORS, INC. C5568 BC
8055 N 24th Av #107
Phoenix Az 85021
Service Representative: [Signature]
Date: 4/30/01

TO THE PERSONAL, FAMILY OR HOUSEHOLD CONSUMER: You may cancel this agreement by providing written notice to the seller in person, by telegram or by mail.

Accepted By: [Signature]
Date: 4/30/01
Owner/Buyer/Authorized Agent

Manager's Approval / Checklist Attached: Yes No

Date: / /

White Copy - Office

Yellow Copy - Customer

This contract provides for re-treatment of a structure but does not provide for the repair of damages caused by wood destroying organisms.



**SENTRICON\* SERVICE AGREEMENT  
LIMITED RETREAT GUARANTEE for**

- Eastern Subterranean Termites  
 Formosan Termites

Account Name - First John Middle Initial Genova Last Genova  
 Service Address 7800 E Number Boulders Pkwy #4 Street  
 City Scottsdale State AZ Zip Code 85206  
 Service Phone:  Home  Office  Fax Line  
 Tenant  Contact Person  Home Phone  Office Phone

Billing Name \_\_\_\_\_  
 Billing Address \_\_\_\_\_ Number \_\_\_\_\_ Street \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Billing Phone:  Home  Office  Fax Line  
 New Home Owner  Home Phone  Office Phone

- TYPE OF STRUCTURE:  RESIDENTIAL..... COMMERCIAL..... MULTI-UNIT: BLDGS. #: \_\_\_\_\_
- STRUCTURES FOR SERVICE:  MAIN DWELLING..... OTHER: \_\_\_\_\_
- TYPE OF INITIAL TREATMENT:  POST-CONSTRUCTION..... NEW-CONSTRUCTION..... OTHER: \_\_\_\_\_
- LOCATION OF NOTICE OF SERVICE:  N/A..... ATTIC..... CRAWL..... OTHER: \_\_\_\_\_
- PURPOSE OF SERVICE:  PREVENTION..... PRESUMPTIVE EVIDENCE..... EXISTING INFESTATION

**INITIAL INVESTMENT**

Initial Cost.....\$ \_\_\_\_\_  
 Other Fees.....\$ \_\_\_\_\_  
 Advanced Renewal Fee.....\$ \_\_\_\_\_  
 Sales Tax.....\$ \_\_\_\_\_  
**TOTAL INITIAL COST.....\$ \_\_\_\_\_**

**METHOD OF PAYMENT**

CHECK  CASH  AMEX  M/C  VISA  DISC  
 Renewal Maintenance Fee .....\$ 328  
 Renewal Frequency .....  Monthly..... Quarterly..... Annually  
 Commencing On \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**UPON RECEIVING FULL PAYMENT AND COMPLETING THE INITIAL SERVICE THE COMPANY WILL PROVIDE A DAMAGE REPAIR & RETREAT GUARANTEE FOR TERMITES AS SPECIFIED AND DESCRIBED IN THE PROVISIONS, TERMS AND CONDITIONS SET FORTH ON THE FRONT AND BACK OF THIS AGREEMENT, WHICH WILL PROVIDE A DETAILED EXPLANATION OF THE GUARANTEE ALONG WITH ALL DISCLAIMERS, LIMITATIONS, CONDITIONS OR EXCLUSIONS.**

**SERVICE PROVISIONS**

ARROW EXTERMINATORS (The Company) is authorized by Dow AgroSciences LLC, to install the Sentricon\* Colony Elimination System and conduct associated monitoring and treatment protocols for customer. The Sentricon\* System allows for monitoring as well as bait treatment for subterranean termites with Recruit\* an insect growth regulator containing the active ingredient Noviflumuron.

The Customer appreciates that subterranean termite control is not immediate. Specifically, control and/or colony elimination may take several months. Customer understands that the inherently delayed action of the insect growth regulator is necessary to defeat avoidance behavior by foraging subterranean termites.

The Company shall provide the following termite control services to Customer under this agreement:

1. Initial inspection of applicable structures and grounds and installation of inground monitoring and/or bait stations around perimeter of structure at the Company's discretion.
2. Monitoring of bait stations by the Company service representatives, commencing with the installation of the system. All stations will be monitored within the guidelines as specified under the most current material label standards.
3. Application of Recruit\* termite bait through in bait stations. The Company may install additional stations and/or modify existing stations at its discretion.
4. Inform the Customer of any new or increased termite activity noted at any of the bait stations during any of the routine inspections.
5. Upon achieving colony elimination, the Company will provide for repairs of new subterranean termite damage as set forth in the provisions, terms and conditions of this agreement. The guarantee is effective immediately upon installation on structures which have no present or past termite activity.

As compensation for services rendered or to be rendered under this agreement, the Customer shall pay the Company an installation fee and maintenance fees, as specified, upon signing the agreement. This agreement and guarantee may be renewed for life by paying the Renewal Maintenance Fees on a consecutive basis, as specified by the Renewal Frequency, listed above. Failure to pay consecutive Renewal Maintenance Fees as specified by the Renewal Frequency, will render this agreement and guarantee null and void. After the first year adjustments to the Renewal Maintenance Fees may be made annually by the Company giving the Customer a minimum of thirty days notice regarding the new rate. This guarantee is transferable to a subsequent owner provided that the Renewal Maintenance Fees are paid on a consecutive basis from the time of the initial installation.

Customer agrees not to move, open, handle or damage Sentricon\* stations, or any other parts of the system. Tampering with such components may compromise the efficacy of the system and shall constitute a basis for terminating this agreement. The Customer may be responsible for the cost of replacement or repair of any damaged or missing bait stations that were not damaged or removed by the Company and/or its agent. The bait stations and associated materials (Sentricon\* Components) provided by the Company are and shall remain the exclusive property of Dow AgroSciences LLC. Customer understands that he does not acquire any ownership interest or title to such components and that upon termination of this agreement for any cause whatsoever, the Company and/or Dow AgroSciences LLC are hereby authorized to remove all such components.

The guarantee in this agreement is in lieu of all other guarantees and warranties, expressed and implied, including the warranties of merchantability and fitness for a particular purpose. The customer is entitled to a copy of any treatment specifications, customer preparation sheets, checklists and any applicable release forms. All specifications and special circumstances have been fully explained to me.

**ARROW EXTERMINATORS, INC.:**

Company Representative  
301 W Deer Valley Rd #3  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
623-431-8586  
 Office Phone \_\_\_\_\_ Office Fax Line \_\_\_\_\_

Manager's Signature \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**TO THE PROPERTY OWNER OR PROPERTY MANAGER:**

If this is a home solicitation you may cancel this agreement by providing written notice to the seller in person or by mail. This notice must indicate that you do not want the goods or services and must be delivered or postmarked before midnight of the third business day after you sign this agreement. If you cancel this agreement, the seller cannot keep any part of a cash down payment. You are entitled to and should receive an exact executed copy of this agreement. This agreement is contingent on the approval of the service center manager.

Accepted By: \_\_\_\_\_

Owner/Buyer  Authorized Agent Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_