

Twin Termite and Pest Control

3720 Madison Avenue #100 North Highlands, CA 95660 Phone: (707) 455-8946

Fax: (916) 344-8942 www.twintermite.com



Anila Guridi

Property Billing Statement

Statement Date: 07/02/2024

Report #: 91932

Service Address: 535 Cement Hill Road, Fairfield, CA 94533

Escrow #:

Closing Date: 11/30/-0001

Date	Description	Charge	Payment	Balance
06/26/2024	PAID CC	0.00	145.00	-145.00
06/27/2024	ORIGINAL	175.00	0.00	30.00
07/02/2024	PAID CC	0.00	30.00	0.00

Balance: 0.00

Make your check payable to: Twin Termite and Pest Control

Send to: 3720 Madison Avenue, #100

North Highlands, CA 95660

For billing questions, call: (707) 455-8946

Thank You

PAYMENT IS DUE AT THE TIME OF INSPECTION OR COMPLETION OF WORK.

UNPAID INSPECTION BALANCES OLDER THAN TEN (10) BUSINESS DAYS WILL HAVE A BILLING FEE OF \$50 ASSESSED.

UNPAID WORK COMPLETION BALANCES THAT ARE THIRTY (30) DAYS PAST DUE (30 days past the date of completion notice) WILL HAVE A 1.5% PER MONTH INTEREST CHARGE ON CURRENT BALANCE UNTIL BALANCE IS CLEARED.

Building No Street Date of Inspection Number of Pages Cement Hill Road 94533 535 Fairfield 06/27/2024 12 **Twin Termite and Pest Control** 3720 Madison Avenue #100 North Highlands, CA 95660 Phone: (707) 455-8946 Fax: (916) 344-8942 www.twintermite.com Report # 91932 Registration # PR5304 Ordered by: Property Owner and/or Party of Interest: Report Sent to: Wendy Rodriguez Anila Guridi Wendy Rodriguez wrodriguez@platarealtygroup.com angie.guridi@gmail.com wrodriguez@platarealtygroup.com DocuSigned by: anila D Guridi COMPLETE REPORT ⊠ LIMITED REPORT SUPPLEMENTAL REPORT REINSPECTION REPORT □ General Description: Inspection Tag Posted: THIS PROPERTY CONSISTS OF A TWO STORY RESIDENCE WITH WOOD AND GARAGE STUCCO SIDING Other Tags Posted: NONE 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. Subterranean Termites
Drywood Termites
Fungus / Dryrot
Other Findings
Further Inspection 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.

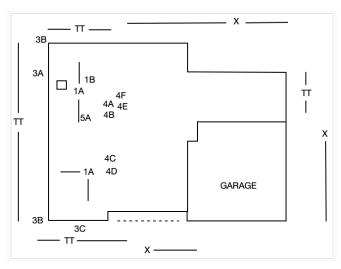


DIAGRAM NOT TO SCALE

Inspected by: <u>David Gonzales Jr.</u> State License No. <u>FR54256</u> 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, 2005 Evergreen Street, Suite 1500, Sacramento, California, 95815.

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) 561-8798 or www.pestboard.ca.gov

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WHAT IS A WOOD DESTROYING PEST & ORGANISM INSPECTION REPORT? READ THIS DOCUMENT. IT EXPLAINS THE SCOPE AND LIMITATIONS OF A STRUCTURAL PEST CONTROL INSPECTION AND A WOOD DESTROYING PEST & ORGANISM INSPECTION REPORT.

A WOOD DESTROYING PEST & ORGANISM INSPECTION REPORT CONTAINS FINDINGS AS TO THE PRESENCE OR ABSENCE OF EVIDENCE OF WOOD DESTROYING ORGANISMS IN VISIBLE AND ACCESSIBLE AREAS AND CONTAINS RECOMMENDATIONS FOR CORRECTING ANY INFESTATIONS OR INFECTIONS FOUND. THE CONTENTS OF WOOD DESTROYING PEST & ORGANISM INSPECTION REPORTS ARE GOVERNED BY THE STRUCTURAL PEST CONTROL ACT AND REGULATIONS.

SOME STRUCTURES DO NOT COMPLY WITH BUILDING CODE REQUIREMENTS OR MAY HAVE STRUCTURAL, PLUMBING, ELECTRICAL, MECHANICAL, HEATING, AIR CONDITIONING OR OTHER DEFECTS THAT DO NOT PERTAIN TO WOOD DESTROYING ORGANISMS. A WOOD DESTROYING PEST & ORGANISM INSPECTION REPORT DOES NOT CONTAIN INFORMATION ON SUCH DEFECTS, IF ANY, AS THEY ARE NOT WITHIN THE SCOPE OF THE LICENSES OF EITHER THIS COMPANY, OR ITS EMPLOYEES.

THE EXTERIOR SURFACE OF THE ROOF WAS NOT INSPECTED. IF YOU WANT THE WATER TIGHTNESS OF THE ROOF DETERMINED, YOU SHOULD CONTACT A ROOFING CONTRACTOR WHO IS LICENSED BY THE CONTRACTORS STATE LICENSE BOARD. AN INSPECTION IS PERFORMED FROM THE GROUND LEVEL ONLY TO VISIBLE AND ACCESSIBLE AREAS.

THIS COMPANY DOES NOT CERTIFY OR GUARANTEE AGAINST ANY LEAKAGE, SUCH AS (BUT NOT LIMITED TO) PLUMBING, APPLIANCES, WALLS, DOORS, WINDOWS, ANY TYPE OF SEEPAGE, ROOF OR DECK COVERINGS. THIS COMPANY RENDERS NO GUARANTEE, WHATSOEVER, AGAINST ANY INFECTION, INFESTATION OR ANY OTHER ADVERSE CONDITION WHICH MAY EXIST IN SUCH AREAS OR MAY BECOME VISIBLY EVIDENT IN SUCH AREA AFTER THIS DATE. THIS COMPANY DOES NOT WATER TEST UPPER LEVEL SHOWER PANS DUE TO DAMAGE THAT MAY OCCUR FROM SUCH LEAKAGE TO THE CEILING BELOW. UPON REQUEST, FURTHER INSPECTION OF THESE AREAS WOULD BE PERFORMED AT AN ADDITIONAL CHARGE.

IN THE EVENT DAMAGE OR INFESTATION DESCRIBED HEREIN IS LATER FOUND TO EXTEND FURTHER THAN ANTICIPATED, ALL WORK WILL CEASE AND A SUPPLEMENTAL REPORT WILL BE ISSUED. OWNER SHOULD BE AWARE OF THIS OPEN BID WHEN CONTRACTING WITH OTHERS OR UNDERTAKING THE WORK HIMSELF/HERSELF.

ALL PESTICIDES AND FUNGICIDES MUST BE APPLIED BY A STATE CERTIFIED APPLICATOR (SEC.8555 BUSINESS AND PROFESSIONS CODE DIVISION 3) AND IN ACCORDANCE WITH THE MANUFACTURERS LABEL REQUIREMENTS.

"*NOTICE: REPORTS ON THIS STRUCTURE PREPARED BY VARIOUS REGISTERED COMPANIES SHOULD LIST THE SAME FINDINGS (I.E. TERMITE INFESTATIONS, TERMITE DAMAGE, FUNGUS DAMAGE, ETC.). HOWEVER, RECOMMENDATIONS TO CORRECT THESE FINDINGS MAY VARY FROM COMPANY TO COMPANY. YOU HAVE A RIGHT TO SEEK A SECOND OPINION FROM ANOTHER COMPANY."

THE WOOD DESTROYING PEST & ORGANISMS REPORT DOES NOT INCLUDE MOLD OR ANY MOLD LIKE CONDITIONS. NO REFERENCE WILL BE MADE TO MOLD OR MOLD-LIKE CONDITIONS. MOLD IS NOT A WOOD DESTROYING ORGANISM AND IS OUTSIDE THE SCOPE OF THIS REPORT AS DEFINED BY THE STRUCTURAL PEST CONTROL ACT. IF YOU WISH YOUR PROPERTY TO BE INSPECTED FOR MOLD OR MOLD LIKE CONDITIONS, PLEASE CONTACT A CERTIFIED INDUSTRIAL HYGIENIST.

THERE MAY BE HEALTH RELATED ISSUES ASSOCIATED WITH THE FINDINGS REFLECTED IN THIS REPORT. WE ARE NOT QUALIFIED TO AND DO NOT RENDER AN OPINION CONCERNING ANY SUCH HEALTH ISSUES. THE INSPECTION REFLECTED BY THIS REPORT WAS LIMITED TO THE VISIBLE AND ACCESSIBLE AREAS ONLY. QUESTIONS CONCERNING HEALTH RELATED ISSUES, WHICH MAY BE ASSOCIATED WITH THE FINDINGS OR RECOMMENDATIONS REFLECTED IN THIS REPORT SHOULD BE DIRECTED TO A CERTIFIED INDUSTRIAL HYGIENIST.

WARNING: EFFECTIVE APRIL 22ND, 2010: IT IS MANDATORY THAT ANY AND ALL PERSONS THAT PERFORM REPAIRS, RENOVATION OR PAINTING MUST ADHERE TO THE NEW EPA REGULATION DETAILED IN 40 CFR 745, SUBPART E. THE REGULATION IS APPLICABLE TO ALL RESIDENTIAL HOUSES, APARTMENTS AND CHILD CARE FACILITIES BUILT PRIOR TO 1978. ALL TRADESPERSONS AND/OR PERSONS WORKING ON A PROPERTY WITH AN INTENT TO SELL MUST SUPPLY THE OWNER AND/OR INTERESTED PARTY THE DESIGNATED EPA PAMPHLET "RENOVATE RIGHT" LEAD HAZARD INFORMATION PAMPHLET. THE EPA REGULATION STIPULATES THAT IF MORETHAN 6 SQUARE FEET OF PAINT ON INTERIOR SURFACES OR MORE THAN

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20 SQUARE FEET ON EXTERIOR SURFACES ARE DISTURBED, OR WINDOWS OR DOORS ARE REMOVED AND REPLACED, THAT THE WORK SURFACES ARE TESTED BY A CERTIFIED LEAD INSPECTOR. TWIN TERMITE PEST CONTROL & CONSTRUCTION, INC. WILL APPROACH ALL NECESSARY REPAIRS ON STRUCTURES BUILT PRIOR TO 1978 AS IF THEY CONTAIN LEAD AND WILL FOLLOW ALL THE RULES FOR RENOVATION AS OUTLINED IN 40 CFR PART 745. TWIN TERMITE PEST CONTROL & CONSTRUCTION, INC. HAS COMPLETED AN EPA-ACCREDITED RENOVATOR COURSE AND IS RECOGNIZED AS A CERTIFIED EPA RENOVATOR. ALSO EFFECTIVE IMMEDIATELY, HOMEOWNERS, OR REPRESENTATIVES OF PROPERTY MAY NOT "OPTOUT" OF THE WORK PRACTICES AS DESCRIBED IN 40 CFR 745.

THIS SEPARATED REPORT HAS BEEN ISSUED WHICH IS DEFINED AS SECTION I SECTION II CONDITIONS EVIDENT ON THE DATE OF INSPECTION.

SECTION I CONTAINS ITEMS WHERE THERE IS EVIDENCE OF ACTIVE INFESTATION, INFECTION OR CONDITIONS THAT HAVE RESULTED IN OR FROM INFESTATION OR INFECTION.

SECTION II ITEMS ARE CONDITIONS DEEMED LIKELY TO LEAD TO INFESTATION OR INFECTION 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 ACCESS TO COMPLETE THEIR INSPECTION AND CANNOT BE DEFINED AS SECTION I OR II

(SECTION 1 ITEM)

(1) SUBTERRANEAN TERMITES

1A. FINDING: EVIDENCE OF SUBTERRANEAN TERMITE ACTIVITY IS VISIBLE AT THE SUBAREA FRAMING.

RECOMMENDATION: CHEMICALLY TREAT THE SUBAREA SOIL ADJACENT TO THE PIER PADS WITH TERMIDOR (ACTIVE INGREDIENT, FIPRONIL) FOR THE CONTROL OF SUBTERRANEAN TERMITES.

ALSO TRENCH AND/OR ROD TREAT THE SOIL ADJACENT TO THE EXTERIOR FOUNDATION WALLS WITH THE SAME MATERIAL. DRILL A SERIES OF HOLES AS INDICATED BY "X" ON THE DIAGRAM THROUGH ANY ATTACHED CONCRETE SLABS ADJACENT TO THE

EXTERIOR FOUNDATION WALLS (APPROX. 18" ON CENTER) AND PRESSURE INJECT TERMIDOR INTO THE SOIL BELOW. PATCH ALL HOLES WITH MORTAR. REMOVE ALL

ACCESSIBLE TERMITE EVIDENCE.

NOTES: GUARANTEE FOR ONE (1) YEAR TO THE IMMEDIATE AREAS TREATED ONLY. THE ABOVE

WORK WILL BE PERFORMED IN A PROFESSIONAL MANNER: HOWEVER, NO LIABILITY CAN BE ASSUMED FOR ANY DAMAGE THAT MAY OCCUR TO PIPES THAT MAY BE CONCEALED

BELOW THE CONCRETE.



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1A:



1A:

(SECTION 1 ITEM)

(1) SUBTERRANEAN TERMITES

1B. FINDING: EVIDENCE OF SUBTERRANEAN TERMITE ACTIVITY IS VISIBLE IN THE CELLULOSE DEBRIS

AT THE SUBAREA.

RECOMMENDATION: REMOVE AND DISPOSE OF ALL LOOSE WOOD SCRAPS AND OTHER CELLULOSE DEBRIS

OF RAKEABLE SIZE OR LARGER.



1B:

(SECTION 1 ITEM)

(3) FUNGUS / DRYROT

3A. FINDING: THERE IS WOOD DECAY FUNGI (DRY ROT) DAMAGE AT THE BARGE RAFTER .

RECOMMENDATION: TRIM OUT THE INFECTED MATERIALS AND APPLY TIMBOR (ACTIVE INGREDIENT:

DISODIUM OCTABORATE TETRAHYDRATE) TO THE ADJACENT INFECTED AREAS AS NECESSARY FOR THE CONTROL OF WOOD DECAY FUNGI (DRY ROT). FILL THE VOIDS

USING AN APPROPRIATE FILLER.

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3A:

(SECTION 1 ITEM)

(3) FUNGUS / DRYROT

3B. FINDING:

THERE IS WOOD DECAY FUNGI (DRY ROT) DAMAGE AT THE BARGE RAFTER .

RECOMMENDATION:

REMOVE ALL DAMAGED WOOD AND REPLACE WITH NEW MATERIAL. APPLY TIMBOR (ACTIVE INGREDIENT, DISODIUM OCTABORATE TETRAHYDRATE) TO THE ADJACENT INFECTED AREAS AS NECESSARY FOR THE CONTROL OF WOOD DECAY FUNGI (DRY ROT).



3B:

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3B:

(SECTION 1 ITEM)

(3) FUNGUS / DRYROT

3C. FINDING: THERE IS EVIDENCE OF WOOD DECAY FUNGI (DRY ROT) DAMAGE AT THE SHEATHING

AND RAFTER OF THE ROOF OVERHANG.

RECOMMENDATION: REMOVE THE ROOF COVERING TO EXPOSE THE DAMAGED AREAS IF NECESSARY.

REMOVE ALL STRUCTURALLY DAMAGED WOOD MEMBERS AND REPLACE WITH NEW

MATERIAL. APPLY TIMBOR (ACTIVE INGREDIENT, DISODIUM OCTABORATE

TETRAHYDRATE) ADJACENT TO THE INFECTED AREAS FOR THE CONTROL OF WOOD DECAY FUNGI AS NECESSARY. INSTALL ROOF COVERING TO THE EXPOSED AREAS ONLY.

GUARANTEE APPLIES TO ROOF COVERING IN REPAIRED AREAS ONLY.

NOTES: DURING THE COURSE OF REPAIRS, IF ADDITIONAL LAYERS OF ROOFING AND/OR ROOF

SHEATHING ARE DISCOVERED AT THE EXPOSED AREA, THE HOMEOWNER WILL BE CONTACTED AND A SUPPLEMENTAL REPORT ISSUED REFLECTING ADDITIONAL

FINDINGS/COSTS.



3C:

(SECTION 2 ITEM)

(4) OTHER FINDINGS

4A. FINDING: THE UPSTAIRS MASTER BATHROOM TUB SPOUT/FAUCET IS LOOSE AND/OR BROKEN.

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RECOMMENDATION: THE OWNER SHOULD CONTACT A LICENSED PLUMBER TO MAKE THE NECESSARY

REPAIRS.

(SECTION 2 ITEM)

(4) OTHER FINDINGS

4B. FINDING: THERE IS A PLUMBING LEAK AT THE HOT WATER HANDLE OF THE TUB IN THE MASTER

BATHROOM.

RECOMMENDATION: THE OWNER SHOULD CONTACT A LICENSED PLUMBER TO MAKE THE NECESSARY

REPAIRS.



4B:

(SECTION 2 ITEM)

(4) OTHER FINDINGS

4C. FINDING: THERE IS A PLUMBING LEAK AT THE RIGHT HANDLE OF THE LEFT VANITY IN THE MASTER

BATHROOM.

RECOMMENDATION: THE OWNER SHOULD CONTACT A LICENSED PLUMBER TO MAKE THE NECESSARY

REPAIRS.



4C:

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(SECTION 2 ITEM)

(4) OTHER FINDINGS

4D. FINDING: THERE IS A PLUMBING LEAK AT THE RIGHT VANITY SINK DRAIN IN THE MASTER

BATHROOM.

RECOMMENDATION: THE OWNER SHOULD CONTACT A LICENSED PLUMBER TO MAKE THE NECESSARY

REPAIRS.



4D:

(SECTION 2 ITEM)

(4) OTHER FINDINGS

4E. FINDING: GROUT AND/OR CAULKING IS CRACKED, MISSING AND/OR LOOSE AT THE MASTER

BATHROOM TUB SURROUND.

RECOMMENDATION: RE-GROUT AND/OR CAULK AS NECESSARY.

NOTES: NO GUARANTEE CAN BE GIVEN AS GROUT AND/OR CAULKING REQUIRE PERIODIC

MAINTENANCE, NO GUARANTEE CAN BE GIVEN ON COLOR MATCH ON GROUT.

(SECTION 2 ITEM)

(4) OTHER FINDINGS

4F. FINDING: THERE IS A PLUMBING LEAK AT THE MASTER BATHROOM SHOWER HANDLE.

RECOMMENDATION: THE OWNER SHOULD CONTACT A LICENSED PLUMBER TO MAKE THE NECESSARY

REPAIRS.

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4F:

(SECTION 3 ITEM)

(5) FURTHER INSPECTIONS

5A. FINDING: WATER DAMAGE WAS NOTED TO THE SHEETROCK IN THE CEILING OF THE DOWNSTAIRS

HALL BATHROOM.

RECOMMENDATION: REMOVE A PORTION OF THE SHEETROCK, WATER TEST THE PLUMBING. IF LEAKAGE IS

NOT FOUND, INSTALL NEW SHEETROCK, TAPE AND TEXTURE AS NECESSARY. A

SUPPLEMENTAL REPORT WILL BE ISSUED REFLECTING ANY FINDINGS OR

RECOMMENDATIONS.

Additional Notes

NOTES: DURING THE COURSE OF ANY REPAIRS IN THE ABOVE-MENTIONED AREAS, SHOULD ANY

FINDINGS AND/OR ISSUES BE FOUND THAT WERE NOT VISIBLE AT THE TIME OF THE INSPECTION, THE OWNER OR OWNERS AGENT WILL BE CONTACTED FOR FURTHER DIRECTION AND A SUPPLEMENTAL REPORT ISSUED REFLECTING ANY ADDITIONAL

FINDINGS, RECOMMENDATIONS AND COSTS.

Additional Notes

NOTES: THERE IS MILLED-IN EVIDENCE OF BEETLES IN THE SUBAREA WOOD MEMBERS. THERE IS

NO VISIBLE EVIDENCE OF ACTIVE INFECTION OR INFESTATION OTHER THAN INDICATED, THE WOOD MEMBERS ARE STRUCTURALLY SOUND; THEREFORE, NO RECOMMENDATION

IS MADE.

Additional Notes

NOTES: THE SHOWER HEAD IN THE UPSTAIRS MASTER BATHROOM SITS ABOVE THE SHOWER

ENCLOSURE WALL LINE, THIS AREA CAN ACCUMULATE WATER. THE OWNER IS ADVISED TO KEEP THIS AREA WELL SEALED AND MAINTAINED AS GENERAL HOME MAINTENANCE.

Additional Notes

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NOTES:		THERE IS MINO INFORMATION (R SWELLING IN THE BA ONLY.	SEBOARDS OF THE LIV	/ING AREA . THIS	IS GENERAL
Additional	Notes					
NOTES:		DOWNSTAIRS H	F INSPECTION, THIS HO IALL BATHROOM TOILE S IS GENERAL INFORM, WORK PERFORMED AN	T WAS MISSING, THE W ATION ONLY. THIS COM	VATER WAS NOT TIPANY ASSUMES	TESTED IN NO
Additional	Notes					
NOTES:			OR REPAIRS VISIBLE A JMES NO LIABILITY FOR DBY OTHERS.		_	_
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Additional	Notes					
NOTES:		SHELVES AND/O	THE INTERIOR GARAGE OR CABINETS. TWIN HO ONS OR INFECTION WH	ME SERVICES ACCEPT	TS NO RESPONSIE	
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NOTES:			THE INTERIOR GARAGE LY VISIBLE WOOD MEM		-	FROCK
Additional	Notes					
NOTES:		_	OF THE STRUCTURE W R MAINTENANCE, THES		_	-
Additional	Notes					
NOTES:			10 FEET FROM GROUNI S ASSUMES NO LIABILI			

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GROUND LEVEL.

Additional Notes

NOTES: THERE ARE MINOR CRACKS IN THE EXTERIOR STUCCO SIDING. PERIODIC INSPECTIONS

ARE ADVISED.

STATE LAW REQUIRES THAT YOU BE GIVEN THE FOLLOWING INFORMATION:

CAUTION: PESTICIDES ARE TOXIC CHEMICALS. STRUCTURAL PEST CONTROL COMPANIES ARE REGISTERED AND REGULATED BY THE STRUCTURAL PEST CONTROL BOARD, AND APPLY PESTICIDES WHICH ARE REGISTERED AND APPROVED FOR USE BY THE CALIFORNIA DEPARTMENT OF PESTICIDE REGULATION 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 TWENTY FOUR (24) HOURS FOLLOWING APPLICATION, YOU EXPERIENCE SYMPTOMS SIMILAR TO COMMON SEASONAL ILLNESS COMPARABLE TO THE FLU, CONTACT YOUR PHYSICIAN OR POISON CONTROL CENTER (1-800-876-4766) AND YOUR PEST CONTROL COMPANY IMMEDIATELY. (916-344-8946)

FURTHER INFORMATION: CONTACT ANY OF THE FOLLOWING: YOUR TERMITE AND PEST CONTROL COMPANY, TWIN TERMITE PEST CONTROL AND CONSTRUCTION, INC., (916-344-8946); FOR HEALTH QUESTIONS--THE SACRAMENTO COUNTY HEALTH DEPARTMENT (916-875-8440), EL DORADO COUNTY ENVIRONMENTAL MANAGEMENT DEPARTMENT (530-621-5300), PLACER COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH (530-889-4000), SAN JOAQUIN ENVIRONMENTAL HEALTH DEPARTMENT (209-468-3420), SOLANO COUNTY ENVIRONMENTAL HEALTH SERVICES DIVISION (707-421-6765), SUTTER COUNTY ENVIRONMENTAL HEALTH DIVISION (530-666-8646), YUBA COUNTY ENVIRONMENTAL HEALTH DEPARTMENT (530-741-6251), AMADOR COUNTY ENVIRONMENTAL HEALTH DEPARTMENT (209-223-6439), SAN DIEGO DEPARTMENT OF ENVIRONMENTAL HEALTH (858-505-6700), COUNTY OF LOS ANGELES DEPARTMENT OF PUBLIC HEALTH (888-700-9995), VENTURA COUNTY ENVIRONMENTAL HEALTH DIVISION (805-654-2813), ORANGE COUNTY ENVIRONMENTAL HEALTH DIVISION (714-433-6000), SANTA BARBARA ENVIRONMENTAL HEALTH SERVICES (805-681-4900); FOR APPLICATION INFORMATION-- THE SACRAMENTO COUNTY AGRICULTURAL COMMISSIONER (916-875-6603), EL DORADO COUNTY AGRICULTURE COMMISSION (530-621-5520), PLACER COUNTY AGRICULTURE COMMISSION (530-823-1698), SAN JOAQUIN COUNTY AGRICULTURE COMMISSION (209-468-3300), SOLANO COUNTY AGRICULTURE COMMISSION (707-421-7465), SUTTER COUNTY AGRICULTURE COMMISSION (530-822-7500), YOLO COUNTY AGRICULTURE COMMISSION (530-666-8140), YUBA COUNTY AGRICULTURE COMMISSION (530-749-5400), AMADOR COUNTY AGRICULTURE COMMISSION (209-223-6487), SAN DIEGO AGRICULTURE WEIGHTS AND MEASURES (858-694-2739), LOS ANGELES AGRICULTURAL COMMISSIONER (626-575-5471), COUNTY OF VENTURA AGRICULTURAL COMMISSIONER (805-654-5000), COUNTY OF SANTA BARBARA AGRICULTURAL COMMISSIONER (805-681-5600), ORANGE COUNTY AGRICULTURE COMMISSION (714-955-0100); AND FOR REGULATORY INFORMATION--THE STRUCTURAL PEST CONTROL BOARD, (800-737-8188) 2005 EVERGREEN STREET, SUITE 1500, SACRAMENTO, CA, 95815.

THANK YOU FOR SELECTING TWIN HOME SERVICES TO PERFORM A STRUCTURAL PEST CONTROL INSPECTION ON YOUR PROPERTY. WE LOOK FORWARD TO WORKING WITH YOU IN ANY REPAIR WORK OR TREATMENTS THAT MAY BE NECESSARY.

FOR TWIN HOME SERVICES TO PERFORM REPAIRS, PLEASE SEE ATTACHED WORK AUTHORIZATION CONTRACT. THE ESTIMATES FOR REPAIRS INCLUDES ONE (1) COAT OF PRIMER PAINTING OF NEW EXTERIOR WOOD MEMBERS (IN THE EVENT THAT PRE-PRIMED WOOD IS NOT USED), WEATHER PERMITTING. UNLESS OTHERWISE NOTED, FINISH PAINTING IS NOT INCLUDED IN ESTIMATE. NO LIABILITY CAN BE ASSUMED FOR DAMAGE TO PERSONAL PROPERTY/WALL HANGINGS ON THE INTERIOR DURING EXTERIOR REPAIRS. TWIN HOME SERVICES DOES NO TEXTURING OR WALL PAPERING UNLESS OTHERWISE NOTED IN REPORT. NEW LINOLEUM WILL BENEUTRAL IN COLOR. IF DESIRED PARTIES WANT TO UPGRADE THE FLOOR COVERING, THERE WILL BE AN ADDITIONAL CHARGE. IF A BUILDING PERMIT IS REQUIRED TO COMPLETE THE WORK CONTRACTED, THE FEES WILL BE ADDED TO THE FINAL BILLING INVOICE. IF THERE ARE ANY ADDITIONAL REQUIREMENTS BY CITY OR COUNTY, THE OWNER OR OWNERS AGENT WILL BE CONTACTED FOR FURTHER DIRECTION. THERE WILL BE NO CHARGE FOR A REINSPECTION IF TWIN HOME SERVICES IS CONTRACTED TO MAKE THE REPAIRS.

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THIS COMPANY WILL REINSPECT REPAIRS DONE BY OTHERS WITHIN FOUR (4) MONTHS OF THE ORIGINAL INSPECTION. A CHARGE CAN BE NO GREATER THAN THE ORIGINAL INSPECTION FEE FOR EACH REINSPECTION. THE REINSPECTION MUST BE DONE WITHIN TEN (10) 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. THERE WILL BE NO GUARANTEE GIVEN BY TWIN HOME SERVICES ON WORK DONE BY OTHERS.

ALL WORK PERFORMED BY TWIN HOME SERVICES IS GUARANTEED FOR ONE (1) YEAR WITH THE EXCEPTION OF CAULKING AND SEALING WHICH IS GUARANTEED FOR THIRTY (30) DAYS, AND PLUMBING WHICH IS GUARANTEED FOR NINETY (90) DAYS, UNLESS OTHERWISE SPECIFIED IN THIS REPORT.

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Twin Termite and Pest Control

3720 Madison Avenue, #100 North Highlands, CA 95660 PHONE: (707) 455-8946 FAX: (916) 344-8942

www.twintermite.com

Report # 91932

ITEMIZED COST BREAKDOWN (Refer to items on the report)

		Primary Work Bid	Secondary Work Bid
SECTION 1:	1A:	\$1620.00	NONE
	1B:	INCLUDED IN 1A	NONE
	3A:	\$86.94	NONE
	3B:	\$586.17	NONE
	3C:	\$605.88	NONE
	Section 1 Total:	\$2,898.99	\$0.00
SECTION 2:	4A:	OTHER TRADE	NONE
	4B:	OTHER TRADE	NONE
	4C:	OTHER TRADE	NONE
	4D:	OTHER TRADE	NONE
	4E:	OTHER TRADE	NONE
	4F:	OTHER TRADE	NONE
	Section 2 Total:	\$0.00	\$0.00
FURTHER INSPECTION:	5A:	\$493.56	NONE
	Further Inspection Total:	\$493.56	\$0.00

Total: \$3,392.55

THIS IS A BINDING CONTRACT between our company and the signing party below, and incorporates our termite report #91932 dated 06/27/2024 for real property located at Fairfield CA 94533.

Items on the report may contain provisions for additional costs over and above the original estimate. Please read the report carefully and completely.

CONDITIONS:

- 1. This offer is limited to 4 months from the date of the report.
- 2. If further inspection is recommended, or if additional work is required, we will provide prices or recommendations for correction. All treatments have a one (1) year guarantee unless otherwise indicated in the report or if an Extended Termite Protection Service has been purchased for additional years. The estimates for repairs include one (1) coat of primer painting of new exterior wood members, in the event that pre-primed wood is not used, weather permitting.
- 3. Notice to owner of Mechanic's Lien as required by the Structural Pest Control Board: Under the California Mechanics Lien Law, any structural pest control operator who contracts to do work for you, any contractor, subcontractor, laborer, supplier or other person who helps to improve your property, but is not paid for his work or supplies, has a right to enforce a claim against

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8.

Twin Termite and Pest Control 3720 Madison Avenue, #100 North Highlands, CA 95660

PHONE: (707) 455-8946 FAX: (916) 344-8942 www.twintermite.com Report # 91932

your property. This means that after a court hearing, your property could be sold by a court officer and the proceeds of the sale used to satisfy the indebtedness. This can happen even if you have paid your contractor in full if the subcontractor, laborers or suppliers remain unpaid. To preserve their right to file a claim or lien against your property, certain claimants such as subcontractors or material suppliers are required to provide you with a document entitled "Preliminary Notice". General contractors and laborers for wages do not have to provide this notice. A Preliminary Notice is not a lien against your property. Its purpose is to notify you of persons who may have a right to file a lien against your property if they are not paid.

- 4. ATTORNEY FEES: The prevailing party shall have the right to collect from the other party its reasonable costs and necessary disbursements and attorneys' fees incurred in enforcing this Agreement.
- 5. Twin will use due caution and diligence in our operations and care will always be taken to minimize any damage, but assumes no responsibility for matching existing colors and styles, or for incidental damage to roof coverings, TV antennas, solar panels, rain gutters, plant life, paint or wall coverings. We are not responsible for personal property. There may be health related issues associated with the structural repairs reflected in the inspection report referenced by this work authorization contract. These health issues include but are not limited to the possible release of mold spores during the course of repairs. We are not qualified to and do not render any opinion concerning such health issues or any special precautions. Any questions concerning health issues or any special precautions to be taken prior to or during the course of such repairs should be directed to a Certified Industrial Hygienist before any such repairs are undertaken. By executing this work authorization contract, customer acknowledges that he or she has been advised of the foregoing and has had the opportunity to consult with a qualified professional.
- 6. This report is limited to the accessible areas of the structure shown on the diagram. Please refer to the report for areas not inspected and further information.
- 7. TERMS OF PAYMENT (please choose an option below as applicable).

Twin Home Services requires a backup payment method to be placed on file to secure the appointment, regardless of the billing option chosen below. Please read through all terms carefully regarding payment requirements. In the event that a credit or debit card is charged for repairs there is a 3% processing fee. This fee does not apply if we receive a check from escrow or from the client. This fee does not apply when an eCheck used for payment.

If the amount of the total job exceeds \$3,500.00, regardless of invoicing through escrow or to the client directly, a required 10% deposit will be charged on the day the job begins to the backup payment method provided. The 10% deposit can be refunded upon receipt of the full amount from escrow. If escrow pays the remaining balance only, the 10% deposit will not be refunded. The 3% processing fee for credit or debit card payment is not refundable.

0	can be charged upon completion of t indicate preference with the office wh	upon completion of repairs. Note: The card provided as backuphe work or shredded upon collection of a check at the property. Please nen scheduling. Credit and/or debit cards are subject to a 3% processing feent by eCheck or collection of payment on-site.
0	We instruct	, holder of escrow number
	to pay the sum of	upon close of escrow. Close of escrow date
	Phone, Escrow O	fficer Email
We au	thorize this company to perform items	

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for a contract price of		_ (Job minimum is \$350.00).			
NAME	OF PERSON TO	CONTACT FOR ACC	ESS:	PHONE #	
GATE (CODE:	ALARM CODE:	COMBO LOCKBO	X CODE:	
9. We a	authorize finish p	ainting to be performed	for an additional cost (S	Select Option Below):	
0	Yes, please finish paint the repaired areas for \$85.00/hour. Paint will be located on-site at:				
0			areas for \$85.00/hour. viding the necessary pa	I understand the cost for paint/materials will be an int.	
0	No, finish painting at an additional cost is not requested.				
				v does not close within 30 days of completion of wor ot approved, late fees may apply.	
SIGNE	SIGNED (Owner or Owner's Agent) DATE				
Owner	Name (Please P	rint)			
Owner	Mailing Address	(Please Print)			
is not m	nade by the agen	t or escrow company it	will be the responsibility	nat they were notified prior by said agent, that if payment y of the owner to produce payment. The credit card to be exed/emailed into service@twinhomeservices.com.	
Please	choose option	1 or option 2:			
1.()Ti will pay		ded for back-up purp	oses only and will be	charged if invoice is over 30 days past completion, I	
Please	Mark One: () (check or () eCheck or	r()Escrow		
2. () T	his card is to be	charged upon comp	letion of the repairs, I	understand there is a 3% processing fee	
NAME	ON CARD			CARD TYPE	
CARD	NUMBER			EXPIRATION DATE:	
SECUR	RITY CODE:	_ BILLING ADDRESS:			
COMPA	ANY:				

DocuSign Envelope ID: 59376F83-A907-47F8-9778-5258F7A4E489 ZATION CONTRACT

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