

Wood Destroying Insect Inspection Report		Notice: Please read important consumer information on page 2 .	
Section I. General Information Inspection Company, Address & Phone		Company's Pest Control Business Lic. No.	Date of Inspection
Raifsnider's Exterminating LLC 131 East Broad St Souderton, PA 18964		BU7276	7/5/2022
		Address of Property Inspected 1640 Clearview Road Lansdale, PA 19446	
Inspector's Name, Signature & Certification, Registration, or Lic. #		Structure(s) Inspected	
Randy Groff 701295 <i>Randy Groff</i>		House & attached garage	
Section II. Inspection Findings This report is indicative of the condition of the above identified structure(s) on the date of inspection and is not to be construed as a guarantee or warranty against latent, concealed, or future infestations or wood destroying insect damage. Based on a careful visual inspection of the readily accessible areas of the structure(s) inspected:			
<input checked="" type="checkbox"/> A. No Visible evidence of wood destroying insects was observed. <input type="checkbox"/> B. Visible evidence of wood destroying insects was observed as follows: <input type="checkbox"/> 1. Live insects (description & location): _____ <input type="checkbox"/> 2. Dead insects, insect parts, frass, shelter tubes, exit holes, or staining (description and location): _____ <input type="checkbox"/> 3. Visible damage from wood destroying insects was noted as follows (description and location): _____			
NOTE: This is not a structural damage report. If box B above is checked, it should be understood that some degree of damage, including hidden damage, may be present. If any questions arise regarding damage indicated by this report, it is recommended that the buyer or any interested parties contact a qualified structural professional to determine the extent of damage and the need for repairs.			
Section III. Recommendations			
<input type="checkbox"/> No action and/or treatment recommended: (Explain if Box B in Section II is checked): _____ <input type="checkbox"/> Recommend action(s) and/or treatment(s) for the control of: _____			
Section IV. Obstructions and Inaccessible Areas		The inspector may write out obstructions or use the following optional key:	
The following areas of the structure(s) inspected were obstructed or inaccessible:			
<input checked="" type="checkbox"/> Basement <u>5, 6, 7, 9, 24</u>		1. Fixed ceiling	
<input checked="" type="checkbox"/> Crawlspace <u>5, 24 11</u>		2. Suspended ceiling	
<input checked="" type="checkbox"/> Main Level <u>1, 3, 4, 6, 9, 11, 24</u>		3. Fixed wall covering	
<input checked="" type="checkbox"/> Attic <u>4, 5, 24</u>		4. Floor covering	
<input checked="" type="checkbox"/> Garage <u>5, 6</u>		5. Insulation	
<input checked="" type="checkbox"/> Exterior <u>16, 17</u>		6. Cabinets or shelving	
<input type="checkbox"/> Porch _____		7. Stored items	
<input type="checkbox"/> Addition _____		8. Furnishings	
<input type="checkbox"/> Other _____		9. Appliances	
		10. No access or entry	
		11. Limited access	
		12. No access beneath	
		13. Only visual access	
		14. Cluttered condition	
		15. Standing water	
		16. Dense vegetation	
		17. Exterior siding	
		18. Window well covers	
		19. Wood pile	
		20. Snow	
		21. Unsafe conditions	
		22. Rigid foam board	
		23. Synthetic stucco	
		24. Duct work, wiring, and/or plumbing	
		25. Spray foam insulation	
		26. Equipment	
Section V. Additional Comments and Attachments (these are an integral part of the report) _____			
Attachments _____			
Signature of Seller(s) or Owner(s) if refinancing. Seller discloses to the buyer all information, to their knowledge, regarding W.D.I. infestation, damage, repair, and treatment history.		Signature of Buyer. The undersigned hereby acknowledges receipt of a copy of both page 1 and page 2 of this report and understands the information reported.	
X		X	