

Wood Destroying Insect Inspection Report			Notice: Please read important consumer information on page 2 .																														
Section I. General Information Inspection Company, Address & Phone Raifsnider's Exterminating LLC 131 East Broad St Souderton, PA 18964		Company's Pest Control Business Lic. No. BU7276	Date of Inspection 12/13/22																														
		Address of Property Inspected 651 New Galena Road Chalfont, PA																															
Inspector's Name, Signature & Certification, Registration, or Lic. # Eric Raifsnider 707550 <i>Eric Raifsnider</i>			Structure(s) Inspected House only																														
<p>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:</p> <p><input checked="" type="checkbox"/> A. No Visible evidence of wood destroying insects was observed.</p> <p><input type="checkbox"/> B. Visible evidence of wood destroying insects was observed as follows:</p> <p style="margin-left: 20px;"><input type="checkbox"/> 1. Live insects (description & location): _____</p> <p style="margin-left: 20px;"><input type="checkbox"/> 2. Dead insects, insect parts, frass, shelter tubes, exit holes, or staining (description and location): _____</p> <p style="margin-left: 20px;"><input type="checkbox"/> 3. Visible damage from wood destroying insects was noted as follows (description and location): _____</p> <p>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.</p>																																	
<p>Section III. Recommendations</p> <p><input type="checkbox"/> No action and/or treatment recommended: (Explain if Box B in Section II is checked): _____</p> <p><input type="checkbox"/> Recommend action(s) and/or treatment(s) for the control of: _____</p>																																	
<p>Section IV. Obstructions and Inaccessible Areas The following areas of the structure(s) inspected were obstructed or inaccessible:</p> <p><input checked="" type="checkbox"/> Basement partial fixed ceiling & wall covering 5,</p> <p><input type="checkbox"/> Crawlspace _____</p> <p><input checked="" type="checkbox"/> Main Level 1, 3, 4, 6, 24</p> <p><input checked="" type="checkbox"/> Attic 11</p> <p><input type="checkbox"/> Garage _____</p> <p><input checked="" type="checkbox"/> Exterior Brick & Siding</p> <p><input type="checkbox"/> Porch _____</p> <p><input type="checkbox"/> Addition _____</p> <p><input type="checkbox"/> Other _____</p>				<p>The inspector may write out obstructions or use the following optional key:</p> <table style="width:100%; border: none;"> <tr> <td style="width: 50%;">1. Fixed ceiling</td> <td style="width: 50%;">15. Standing water</td> </tr> <tr> <td>2. Suspended ceiling</td> <td>16. Dense vegetation</td> </tr> <tr> <td>3. Fixed wall covering</td> <td>17. Exterior siding</td> </tr> <tr> <td>4. Floor covering</td> <td>18. Window well covers</td> </tr> <tr> <td>5. Insulation</td> <td>19. Wood pile</td> </tr> <tr> <td>6. Cabinets or shelving</td> <td>20. Snow</td> </tr> <tr> <td>7. Stored items</td> <td>21. Unsafe conditions</td> </tr> <tr> <td>8. Furnishings</td> <td>22. Rigid foam board</td> </tr> <tr> <td>9. Appliances</td> <td>23. Synthetic stucco</td> </tr> <tr> <td>10. No access or entry</td> <td>24. Duct work, wiring, and/or plumbing</td> </tr> <tr> <td>11. Limited access</td> <td>25. Spray foam insulation</td> </tr> <tr> <td>12. No access beneath</td> <td>26. Equipment</td> </tr> <tr> <td>13. Only visual access</td> <td></td> </tr> <tr> <td>14. Cluttered condition</td> <td></td> </tr> </table>		1. Fixed ceiling	15. Standing water	2. Suspended ceiling	16. Dense vegetation	3. Fixed wall covering	17. Exterior siding	4. Floor covering	18. Window well covers	5. Insulation	19. Wood pile	6. Cabinets or shelving	20. Snow	7. Stored items	21. Unsafe conditions	8. Furnishings	22. Rigid foam board	9. Appliances	23. Synthetic stucco	10. No access or entry	24. Duct work, wiring, and/or plumbing	11. Limited access	25. Spray foam insulation	12. No access beneath	26. Equipment	13. Only visual access		14. Cluttered condition	
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<p>Section V. Additional Comments and Attachments (these are an integral part of the report) _____</p> <p>_____</p> <p>_____</p> <p>Attachments _____</p>																																	
<p>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.</p> <p>X</p>			<p>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.</p> <p>X</p>																														