



Serving Winston Salem &
The Surrounding Areas since 1973

TERMITE INSPECTION REPORT

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Customer Name Mr. Harry L. Myers Date 11/28/18 Invoice # 35891
Service Address 239 Rockhead RD
City Mocksville NC Zip 27028 Renewal Amount \$123.00
Phone # 336 998 2132 Email _____

TYPE OF CONSTRUCTION-FOUNDATION

☐ Log Home ☐ Monolithic Slab ☐ Basement ☐ Supported Slab ☐ Piers-Only Open
☐ Combination ☒ Crawl ☐ Floating Slab ☐ Mobile Home Foundation

INSPECTOR FINDINGS

A. ☒ No evidence of active termites located B. ☐ Live activity indicated C. ☐ Visible evidence of termite activity

If "B" or "C" is checked above, retreatment will be recommended.

☐ Retreatment is scheduled for _____ between _____ and _____ ☐ AM ☐ PM

☐ Please contact our office to schedule a retreatment date.

Location of Termite Evidence _____

FACTORS WHICH MAY LEAD TO INFESTATION

☐ Inadequate ventilation in crawl space ☐ Wood Mulch ☐ Wood-earth contact
☐ High moisture condition/water leakage ☐ Faulty gutters/No splash guards ☐ Poor drainage condition
☐ Trees/shrubs touching structure ☐ Siding less than 6" from grade ☐ Wood debris in crawl space
☐ Landscape timbers ☐ Wood against structure ☐ Other _____

Comments _____

It is very important that you remedy any conducive conditions posted above. If you fail to do so, it is probable that your structure will experience future termite activity. Please notify us in writing when you have corrected these conducive conditions.

PESTS OR EVIDENCE FOUND

☐ Carpenter Bees ☐ Carpenter Ants ☐ Wood Boring Beetles
☐ Ants ☐ Spiders ☐ Roaches
☐ Rodents ☐ Wildlife ☐ Other _____

Additional treatment recommended- ☐ Yes ☐ No ☐ One Time ☐ Quarterly ☐ Monthly

This report is limited to a visual inspection of the exposed structure. There may be hidden infestations and/or damage that are not evident from a visual inspection. Specifically: 1. Whether or not live activity is indicated 2. Visible factors which may lead to infestation.

Customer: Have you made any additions or modifications around the structure since treated by Ray Pest Control? ☐ Yes ☐ No

If yes, location _____

(The work has been performed and explained to my satisfaction)

Inspectors Signature [Signature]

Customer's Signature [Signature]