

OFFICIAL SOUTH CAROLINA WOOD INFESTATION REPORT

THIS REPORT VALID FOR 45 DAYS ONLY. THIS REPORT MAY NOT BE USED IN A REAL ESTATE CLOSING AFTER 45 DAYS. THIS REPORT IS NOT TO BE CONSTRUED AS A GUARANTEE OR WARRANTY AGAINST FUTURE INFESTATION OR DAMAGE. IT IS RECOMMENDED BY THE DEPARTMENT OF PESTICIDE REGULATION, REGULATORY AND PUBLIC SERVICE PROGRAMS, AND THE SOUTH CAROLINA PEST CONTROL ASSOCIATION THAT THE PURCHASER OF THE STRUCTURE, RATHER THAN THE SELLER, OBTAIN THIS WOOD INFESTATION REPORT.

Date 10/29/09

File No. Evans

This is to report that a qualified inspector employed by the below named firm has carefully inspected readily accessible areas, including attics and crawl spaces which permit entry, of the property located at the below address for termites, other wood-destroying insects, and fungi. The inspection for fungi and fungal damage commonly called water damaged wood, rot or decay is limited to the area below the first main floor of the structure as defined by DPRPN-198. This report specifically excludes hidden areas and areas not readily accessible, and the undersigned pest control operator disclaims that he has made any inspection of such hidden areas or of such areas not readily accessible.

The inspection described has been made on the basis of visible evidence, and special attention was given to those accessible areas which experience has shown to be particularly susceptible to attack by wood-destroying insects. Probing and/or sounding of those areas and other visible and accessible wood members showing evidence of infestation was performed. This report is submitted without warranty, guarantee, or representation as to concealed evidence of infestation or damage or as to future infestation.

If there is evidence of active infestation or past infestation of termites and/or other wood-destroying insects or fungi, it must be assumed that there is some damage to the building caused by this infestation; however any visible damage to a wood member in accessible areas has been reported. The below-named firm's inspectors are not engineers or builders, and you may wish to call a qualified engineer or expert in the building trade to provide their opinion as to whether there is structural damage to this property.

LOCATION AND DESCRIPTION OF PROPERTY INSPECTED: 217 Kathmaette Dr.
Seneca, S.C.

TYPE OF TRANSACTION: FHA _____ VA _____ CONVENTIONAL LOAN ASSUMPTION _____ CASH SALE _____

IF ANY OF THE FOLLOWING ITEMS ARE MARKED YES, DESCRIBE ON REVERSE:

INFESTATION:	Check Only Appropriate Items	
	YES	NO
WERE ANY AREAS OF THE PROPERTY OBSTRUCTED OR INACCESSIBLE?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
1. There is visible evidence of active: (A) subterranean termites.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(B) other wood-destroying insects.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. There is visible evidence of a previous infestation of:		
(A) subterranean termites.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(B) other wood-destroying insects.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. There is visible evidence of prior subterranean termite treatment.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. There is evidence below the first main floor of the presence of:		
(A) active wood-destroying fungi (wood moisture content 28% or above).....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(B) wood-destroying fungi is present but not active (less than 28% wood moisture content).....	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. There is evidence of the presence of excessive moisture conditions below the first main floor (20% or above wood moisture content, standing water, etc.).....	<input checked="" type="checkbox"/>	<input type="checkbox"/>

DAMAGE: Termite, other wood-destroying insects and fungi (Note: reporting of fungal damage to wood, commonly called water damage, decay or rot, is limited to the area below the first main floor of the structure as defined by DPRPN-198.) At the time of our inspection, there were visibly damaged wooden members (e.g insect damage to columns, sills, joists, plates, door jambs, headers, exterior stairs, porches, or fungal damage below the first main floor)..... YES NO
If the answer is "YES," specify causes and location(s) on back.

DAMAGE OBSERVED (IF ANY)

A. Will be or has been corrected by this company.....

B. Will be or has been corrected by another company (see attached contract.).....

C. Will not be corrected by this company; recommend that structure be thoroughly and completely evaluated by a qualified building expert licensed or registered with the S.C. Department of Labor, Licensing, and Regulations, Residential Builder's Commission and that needed repairs be made.....

D. In our opinion there is insufficient visible damage to recommend repair. (Explanation on the reverse side why repair was not recommended.).....

TREATMENT

1. The property described was treated by us for the prevention or control of.....

_____ (date of treatment)

A waiver has been issued and is attached to this form.....

The present treatment warranty will expire on _____ by the owner.

and may be renewed initially at \$ _____

2. The property described has not been treated by us and is not now under contract with our firm.....

CONDITIONS GOVERNING THIS REPORT

Please read carefully.

This report is based on the observations and opinions of our inspector. It must be noted that all buildings have some wood members which are not visible or accessible for inspection. It is not always possible to determine the presence of infestation without extensive probing and in some cases actual dismantling of parts of the structure being inspected.

All inspections and reports will be made on the basis of what is visible, and we will not render opinions covering areas that are enclosed or not readily accessible, areas of finished rooms, areas concealed by wall coverings, floor coverings, insulation, furniture, equipment, stored articles, or any portion of the structure in which inspection would necessitate tearing out or marring finished work. We do not move furniture, appliances, equipment, etc. Plumbing leaks may not be apparent at the time of inspection. If evidence of such leaks is disclosed, liability for the correction of such leaks is specifically denied. No opinion can be rendered as to infestation or damage on that portion of sheathing, siding or other susceptible material which continues below soil grade.

The areas of the substructure and attic that are accessible and open for inspection have been inspected. The substructure is defined as that portion of the building below the first main floor living space.

Detached garages, sheds, lean-tos, fences, or other buildings on the property are not included in this inspection report unless specifically noted.

The company, upon specific request and agreement as to additional charge, will open any inaccessible, concealed, or enclosed area and inspect same and make a report thereon.

REMARKS

THIS SPACE IS TO BE USED TO DETAIL ANY "YES" ANSWERS FROM THE FRONT OF THIS FORM. INCLUDE ITEM NUMBER WITH EACH EXPLANATION. CLARIFICATION AND EXPLANATION OF OTHER ITEMS MAY ALSO BE INCLUDED.

Inaccessible areas: Attic due to insulation. Most of basement is finished off. No attempt was made to inspect areas behind finished walls, ceilings, or under floor coverings. Excessive clutter along walls in garage. Floor coverings throughout.

A combination of termite and water damage was found on the bottom, right side of the fire place. Possible hidden damage behind the paneling in this area. The termite and water damage is also evident on both sides of the chimney in the basement along the bookcases. May be hidden damage behind these areas. Mold and mildew are present on the paneled walls in the basement in many areas. Termite damage to the bottom, right door post of the garage door.

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.

LICENSE NUMBER OF PERSON SIGNING THIS REPORT

CA005289

(MUST BE CERTIFIED IN CATEGORY 7A)

Business License Number B001913

ACKNOWLEDGMENT:

Firm: OCONEE PEST CONTROL

BY: Dad My

ADDRESS: P. O. BOX 1232

OR FIRM: SENECA, S. C. 29679

PURCHASER ACKNOWLEDGES THAT A COPY OF THIS REPORT HAS BEEN REVIEWED AND RECEIVED.

DATE ACKNOWLEDGED

PURCHASER'S SIGNATURE