

# Wood Destroying Insect Inspection Report

Notice: Please read important consumer information on page 2.

## Section I. General Information

Inspection Company, Address & Phone  
**Coastline Pest Control**  
**605 Twin Tree Road**  
**Salisbury, MD 21801**  
**410-546-0111**

Company's Business Lic. No.

**28967**

Date of Inspection

**5/28/09**

Address of Property Inspected

**25722 Drum Point Rd**  
**Westover, Md 21871**

Inspector or Authorized Signature - Print Inspector's Name - Certification/Credentiaing # if applicable.

**Jack James**

Structure(s) Inspected

**House ONLY**

## Section II. Inspection Findings

This report is indicative of the condition of the above inspected 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 defects. Based on a careful visual inspection of the readily accessible areas of the structure(s) inspected:

- A. No visible evidence of wood destroying insects was observed.
- B. Visible evidence of wood destroying insects was observed as follows: (See attached diagram)
- 1. Live insects (description & location): \_\_\_\_\_
  - 2. Dead insects, parts, frass, shelter tubes, exit holes, or staining (description and location): \_\_\_\_\_
  - 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. Maryland regulations require the inspector indicate, if known, whether the damage indicated by this report has, or will be, corrected or further evaluated. Unless disclosed in Section V. below, the inspector does not know the disposition of the listed damage.

Yes  No  It appears that the structure(s) or a portion thereof may have been previously treated. Evidence of possible previous treatment:

The inspecting company can give no assurances with regard to work done by other companies. The company that performed the treatment should be contacted for information on treatment and any warranty or service agreement which may be in place.

## Section III. Recommendations/Treatment

No treatment recommended; (Explain if Box B in Section II is checked) \_\_\_\_\_

- Recommend treatment for the control of: \_\_\_\_\_
- Proper control measures were performed by this inspection company for insect evidence listed in Section II. B., above.

## Section IV. Obstructions and Inaccessible Areas

The following areas of the structure(s) inspected were obstructed or inaccessible:

- Basement
- Crawlspace **5, 24**
- Main Level **1, 3, 4, 7, 8, 9**
- Attic **11**
- Garage
- Exterior **17**
- Porch
- Other

The inspector may write out obstructions or use the following optional key:

- |                         |  |
|-------------------------|--|
| 1. Fixed ceiling        | 13. Only visual access                 |
| 2. Suspended ceiling    | 14. Cluttered condition                |
| 3. Fixed wall covering  | 15. Standing water                     |
| 4. Floor covering       | 16. Dense vegetation                   |
| 5. Insulation           | 17. Exterior coverings                 |
| 6. Cabinets or shelving | 18. Window well covers                 |
| 7. Stored items         | 19. Wood pile                          |
| 8. Furnishings          | 20. Snow                               |
| 9. Appliances           | 21. Unsafe conditions                  |
| 10. No access or entry  | 22. Rigid foam board                   |
| 11. Limited access      | 23. Synthetic stucco                   |
| 12. No access beneath   | 24. Dust work, plumbing, and/or wiring |

## 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 acknowledges that all information regarding W.D.I. infestation, damage, repair, and treatment history has been disclosed to the buyer.

Print name of Property Owner/Seller: \_\_\_\_\_

**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.

Coastline Pest Control, LLC

# Invoice

605 Twin Tree Rd  
Salisbury, MD 21801  
410-546-0111

Date	Invoice #
6/9/2009	7164

Bill To
Marshall Auctions 2815 N. Salisbury Blvd. Salisbury, Md 21801

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
	Termite Inspection. Service done on 5/28/09 @ 25722 Drum Point Rd., Westover, MD 21871	80.00	80.00

Thank you for your business.	<b>Total</b>	\$80.00
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