Williams Pest Management, L.L.C.
P.O. Box 623 • Bill Taylor Road
Romney, WV 26757
304-822-3631

SEPTIC SYSTEM REPORT

REFERENCE: Luther & Ashley Suddath

PROPERTY: RR1 Box 78C
Augusta WV 26704

SYSTEM HISTORY:

1. HAS PROPERTY BEEN OCCUPIED CONTINUOUSLY DURING THE LAST 12 MONTHS? YES ___ NO X
2. HAS SEPTIC SYSTEM BEEN CHECKED FOR SYSTEM PROBLEMS/FAILURE BY ANY OTHER COMPANY IN THE LAST 12 MONTHS? IF YES, PROVIDE DATE(S), NAME OF COMPANY, AND NATURE OF PROBLEM(S)/FAILURE _____ YES ___ NO X
3. HAS SEPTIC SYSTEM BACKED UP/BEEN REPAIRED IN LAST 12 MONTHS? YES ___ NO X
4. HAS SEPTIC SYSTEM BEEN PUMPED IN LAST 12 MONTHS? IF YES HOW OFTEN LIST DATE(S)_____ YES ___ NO X
5. DOES THIS PROPERTY USE A CONVENTIONAL SEPTIC SYSTEM? YES X NO ___

INFORMATION PROVIDED BY: St-14-07-49 (Health Dept.)
SIGNATURE OF CUST./AUTH. REP.

INFORMATION PROVIDED: X IN PERSON ___ BY TELEPHONE

INVOLVEMENT IN PROPERTY: ___ REALTOR ___ OWNER ___ TENANT ___ OTHER _____

A VISUAL INSPECTION OF THE SEPTIC FIELD AND A TRACE DYE METHOD TEST WERE PERFORMED ON THE SEPTIC SYSTEM FOR THE ABOVE REFERENCED PROPERTY.

VISUAL INSPECTION RESULTS:

BASED UPON THE VISUAL INSPECTION OF THE SEPTIC FIELD, THE FOLLOWING WAS OBSERVED:
___ VISUAL EVIDENCE OF SEPTIC LEAK; EVIDENCE IS _____
X NO VISUAL EVIDENCE OF SEPTIC LEAK.

TRACE DYE TEST RESULTS:

THERE WAS NO VISUAL EVIDENCE OF TRACE DYE OBSERVED ON THE SURFACE OF SEPTIC FIELD. X
THERE WAS VISUAL EVIDENCE OF TRACE DYE OBSERVED ON THE SURFACE OF SEPTIC FIELD INDICATING POSSIBLE SEPTIC FAILURE AND/OR OUTBREAK AT THE TIME OF THE INSPECTION. ____

THE SYSTEM HISTORY INFORMATION PROVIDED, AND THE TRACE DYE TEST CARRIED OUT ARE DESIGNED TO INDICATE THE POSSIBLE PRESENCE OF MAJOR SEPTIC TANK AND SEPTIC LINE BREAKAGE. THE ABSENCE OF SURFACE DYE IS NOT A GUARANTEE OR CERTIFICATION THAT A SEPTIC SYSTEM EXISTS AND IS PRESENT ON THE PROPERTY. THE ABSENCE OF SURFACE DYE IS NOT A CERTIFICATION OR GUARANTEE OF THE CONDITION OF THE SEPTIC SYSTEM OR THAT THE SEPTIC SYSTEM IS IN WORKING ORDER. FOR THIS REASON, WILLIAMS PEST CONTROL, INC. IS NOT RESPONSIBLE FOR ANY FAILURE OF THE SEPTIC SYSTEM EITHER AT THE TIME OF THE INSPECTION AND TRACE DYE TEST OR AT ANY TIME AFTER THE INSPECTION AND TRACE DYE TEST.

INSPECTORS NAME: E. Shockey INSPECTORS SIGNATURE: E Wesson Shockey

DATE OF INSPECTION: 10-04-07

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE INFORMATION CONTAINED IN THIS REPORT PERTAINING TO THE ABOVE REFERENCED SEPTIC SYSTEM TRACE DYE TEST AND VISUAL INSPECTION.

AUTHORIZED CUSTOMER/REPRESENTATIVE SIGNATURE: Luther Suddath Ashley Suddath

DATE: 11-30-07

PROFESSIONAL
Termite & Pest Services, LLC

P.O. Box 70, Gore, VA 22637
304.856.2222

ACCOUNT NO.

Termite Control Agreement

AGREEMENT made this 6th day of April 20 15 by and between **PROFESSIONAL TERMITE & PEST SERVICES, LLC.**
Professional Termite & Pest Services, LLC P.O. Box 70 Gore VA 22637
hereinafter call the **TERMITE CONTRACTOR** and Luke Suddarth
Street PO Box 984 City Augusta State WV Zip Code
(Home No. 304-496-9620 Work No. 301 707-8430) who declares him/herself to be the owner or authorized agent of the property named, and hereinafter called the **OWNER.**

Termite Re-Treatment Guarantee

PROFESSIONAL TERMITE & PEST SERVICES, LLC GUARANTEES THAT IT WILL BE PROVIDED RE-TREATMENT, IF NEW INFESTATION IS FOUND DURING THE PERIOD THIS GUARANTEE IS IN FORCE **AT NO EXTRA COST**; subject to the inspection graph, specifications and general condition on the reverse side of this agreement.

1. The TERMITE CONTRACTOR agrees to treat for the sum of $ 1232.92
the property at Street 84 Ivy Ln. City Augusta State WV Zip Code
for the control of subterranean termites and to furnish for said property for a period of One (1) year(s) from this date its subterranean termite control service under the following terms and conditions.
2. Make Periodic Inspections are requested by OWNER or TERMITE CONTRACTOR.
3. Give additional treatment at any time during the One (1) year term if subterranean termite infestation is found; such treatment to be without cost to the OWNER.
4. In Consideration of the above, a payment of 0 % of the price agreed upon, must be paid at the signing of this contract.
Down Payment of $ 0 and Balance of $ 1232.00 to be as follows $ 1232.92 + 73.92 = 1305.92
Miscellaneous:

IN THE EVENT FULL PAYMENT IS NOT MADE WITHIN 30 DAYS AFTER INVOICING, A FINANCE CHARGE WILL BE ADDED TO THE UNPAID BALANCE. IF A FINANCE CHARGE APPEARS ON THE STATEMENT, IT WAS COMPUTED BY A PERIODIC RATE OF 1-1/2% PER MONTH WHICH IS AN ANNUAL PERCENTAGE RATE OF 18% ADDED TO THE PERVIOUS BALANCE AFTER DEDUCTING CURRENT PAYMENTS, AND/OR CREDITS APPEARING ON THE STATEMENT.

5. It is futher agreed and understood that in the event of default by the OWNER in the payment of the contract price, or any part thereof under this contract, the TERMITE CONTRACTOR shall be released from further inspections or re-servicing as herein provided. Such failure to make payments nullifies TERMITE CONTRACTOR'S responsibility under this AGREEMENT.
6. The OWNER warrants full cooperation with the TERMITE CONTRACTOR during this life of this AGREEMENT and agrees to maintain the treated are free from any factor, or condition, contributing to re-infestation by subterranean termites, such as moisture from drains or faulty plumbing, debris, lumber, or wood in direct contact with the ground.
7. As soil treatment is an essential part of this control treatment, the OWNER agrees to not disturb the soil within one foot of either side of the building foundations, or either side of any part of the structure which is in contact with the ground or concrete. In the event soil is disturbed, OWNER agrees to allow TERMITE CONTRACTOR to treat soil for an additional charge.
8. Failure to comply herewith by OWNER shall nullify this AGREEMENT.
9. The OWNER hereunder shall have the option of extending this AGREEMENT on or before the expiration hereof for an additional term of one year or longer, if agreeable to both parties, upon payment in advance to the TERMITE CONTRACTOR of $ 75.00
10. The TERMITE CONTRACTOR hereby agrees that this AGREEMENT and any extension of the same shall at OWNER's option pass with the title of the property covered hereunder, provided that all payments under this AGREEMENT will be made by the new OWNER, as herein specified and provided that prompt written notice of such transfer is given to the TERMITE CONTRACTOR.
11. Only such agreements, as clearly specified herein, shall be binding upon the parties hereto.
12. **YOU, THE BUYER, MAY CANCEL THIS TRANSACTION AT ANY TIME PRIOR TO MIDNIGHT OF THE THIRD BUSINESS DAY AFTER THE DATE OF THIS TRANSACTION.**

OWNER x [signature]
PROFESSIONAL TERMITE & PEST SERVICES, LLC
By [signature]

METHOD OF PAYMENT
❑ CASH ❑ CHECK NO. ❑ MASTERCARD ❑ VISA

CREDIT CARD NO _____ EXP. DATE _____

SIGNATURE _____

WHITE - Branch YELLOW - File PINK - Customer

Wood Destroying Insect Inspection Report

Notice: Please read important consumer information on **page 2.**

Section I. General Information

Inspection Company, Address & Phone

Williams Pest Management LLC
P.O. Box 623
Romney WV 26757 (1-304-822-3631)

Company's Business Lic. No.: 0625

Date of Inspection: 10-4-07

Address of Property Inspected
Luther & Ashley Sudduth
RR1 Box 78C
Augusta WV 26704

Inspector's Name, Signature & Certification, Registration, or Lic. #
G. Williams / Gary Williams

Structure(s) Inspected: Home.

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 defects. **Based on a careful visual inspection of the readily accessible areas of the structure(s) inspected:**

- [X] **A. No visible** evidence of wood destroying insects was observed.
- [ ] **B. Visible** evidence of wood destroying insects was observed as follows:
  - [ ] 1. Live insects (description and location): _____
  - [ ] 2. Dead insects, insect 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.

Yes [ ] No [ ] It appears that the structure(s) or a portion thereof may have been previously treated. Visible 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

- [ ] No treatment recommended: (Explain if Box B in Section II is checked) _____
- [ ] Recommend treatment for the control of: _____

Section IV. Obstructions and Inaccessible Areas

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

- [ ] Basement
- [ ] Crawlspace
- [X] Main Level 1, 3, 4
- [ ] Attic
- [ ] Garage
- [ ] Exterior
- [ ] Porch
- [ ] Addition
- [ ] 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 siding
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. Duct 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.

X _____

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.

Ashley Sudduth Luther J Sudduth

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Form NPCA-1 is obsolete after 12/31/04. This form is approved for FHA and VA loans.