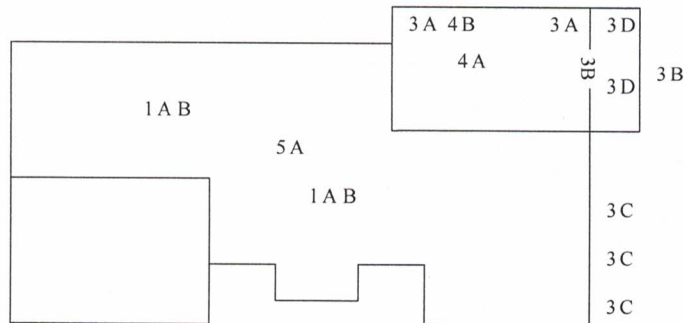


WOOD DESTROYING PESTS AND ORGANISMS INSPECTION REPORT

Building No. 6	Street WHITE TAIL LANE	City MONTEREY	Zip 93940	Date of Inspection 2/28/2024	Pages 5
(831) 757-6000 (831) 373-6400 (831) 633-9000 Registration# PR 7135		CASNER EXTERMINATING INC. 11025 Commercial Pkwy. Castroville, CA 95012 (800) 655-4044 FAX (831)633-9081 Report: Document4 Escrow #			
Ordered By: BRIAN BUTLER-MONTEREY COAST REALTY		Property Owner and/ or Party of Interest: C/O MONTEREY COAST REALTY		Completion sent to:	
COMPLETE REPORT <input checked="" type="checkbox"/>		LIMITED REPORT <input type="checkbox"/>		SUPPLEMENTAL REPORT <input type="checkbox"/>	
REINSPECTION REPORT <input type="checkbox"/>		General Description: Furnished and occupied two story residence unproved underea tile roof		Inspection Tag Posted: wall	
		Other Tags Posted:			
An inspection has been made of the structure(s) shown on the diagram in accordance with the Structural Pest Control Act. Detached porches, detached steps, detached decks and any other structures not on the diagram were not inspected.					
Subterranean Termites <input checked="" type="checkbox"/> Drywood Termites <input type="checkbox"/> Fungus / Dryrot <input checked="" type="checkbox"/> Other Findings <input checked="" type="checkbox"/> Further Inspection <input checked="" type="checkbox"/> If any of the above boxes are checked, it indicates that there were visible problems in accessible areas. Read the report for details on checked items.					



FRONT

Inspected by **ROBERTO NAVA** License No. FR 57437 Signature

You are entitled to obtain copies of all reports and completion notices on this property reported to the Structural Pest Control Board during the preceding two years. To obtain copies contact: Structural Pest Control Board, 2005 Evergreen Street, suite 1500, Sacramento, California 95815.

NOTE: Questions or problems concerning the above report should be directed to the manager of the company. Unresolved questions or problems with services performed may be directed to the Structural Pest Control Board at (916) 561-8708, (800) 737-8188 or www.pestboard.ca.gov.

SECOND PAGE OF THE CASNER EXTERMINATING COMPANY STANDARD INSPECTION REPORT
OF THE PROPERTY LOCATED AT:

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READ THIS DOCUMENT: IT EXPLAINS THE SCOPE AND LIMITATIONS OF A STRUCTURAL PEST CONTROL WOOD DESTROYING PEST & ORGANISM INSPECTION REPORT. A WOOD DESTROYING PEST AND ORGANISM INSPECTION REPORT CONTAINS FINDINGS AS TO THE PRESENCE OR ABSENCE OF EVIDENCE OF WOOD DESTROYING INSECTS OR ORGANISMS IN VISIBLE AND ACCESSIBLE AREAS ON THE DATE OF INSPECTION AND CONTAINS OUR RECOMMENDATIONS FOR CORRECTING ANY INFESTATIONS, INFECTIONS, OR SUCH CONDITIONS FOUND. THE CONTENTS OF THE WOOD DESTROYING PEST AND ORGANISM INSPECTION REPORT ARE GOVERNED BY THE STRUCTURAL PEST CONTROL ACT AND ITS RULES AND REGULATIONS. SOME STRUCTURES MAY HAVE HEALTH OR SAFETY DEFICIENCIES SUCH AS: MOLDS, LEAD, RADON OR ASBESTOS; MAY NOT COMPLY WITH BUILDING CODE REQUIREMENTS; MAY HAVE STRUCTURAL, PLUMBING, ELECTRICAL, HVAC OR OTHER DEFECTS OR HAZARDS THAT DO NOT PERTAIN TO WOOD DESTROYING ORGANISMS. A WOOD DESTROYING PEST AND ORGANISM INSPECTION REPORT DOES NOT CONTAIN INFORMATION ABOUT SUCH DEFECTS AS THEY ARE NOT WITHIN THE SCOPE OF THE LICENSE OF THE INSPECTOR NOR THE COMPANY ISSUING THIS REPORT.

SCOPE OF THE INSPECTION: This report covers areas that were open, visible and accessible at the time of inspection. Some areas are considered impractical for inspection and were not inspected. This includes areas concealed by: concrete slabs, pipes, heat ducts, floors, floor coverings, furnishings, stored items, built-in cabinet work, appliances (also not water tested), insulation, low clearance attic areas, roof coverings (also not walked on), walls, ceilings, stair fire walls, bay windows, soffits, roof gutters, interior of chimneys, areas above twelve feet from ground and/or floor levels and similar segments of the structure. Showers over finished ceilings were not water tested. Windows were not operated and coverings not removed. Vegetation, soil, rock, concrete and similar grade surfaces were not removed. Finished surfaces were not defaced. These areas were not inspected so as not to endanger health or property. Fences, retaining walls, and similar abutments were not inspected. Infestations or damage may exist in these areas without our knowledge and are not our responsibility. Arrangements can be made to have these areas inspected. **The exterior surface of the roof was not inspected. If you want the water tightness of the roof determined, you should contact a roofing contractor who is licensed by the Contractor's State License Board.**

WORK BY THIS FIRM: Fumigation and electro-gun treatments for drywood termites and soil treatment for subterranean termites are warranted for period of two(2) years, unless otherwise specified. Construction repairs performed by this firm are warranted for one(1) year from the date of completion with the exception of: Floor coverings, plumbing, patching, caulking, and similar water seals which are warranted for thirty(30) days. Our quoted prices are for locally available repair materials of similar quality and size which may not match exactly and do not include painting, staining, texturing nor paper-hanging. Prices are subject to change after forty-five(45) days. No guarantee is implied nor expressed for conditions which may become apparent after the date of inspection. If additional problems are found at concealed areas, or additional work is requested by interested parties or local building officials, a supplemental report will be issued with a price bid or estimate to make additional corrections.

WORK BY OTHERS: This firm will assume no responsibility for work performed by others. It is the property owner's responsibility to obtain and pay for necessary building permits associated with home maintenance (UBC Sect. 104(d)). We will reinspect work performed by others within ten(10) working days of request by the person ordering the original report when a bid or estimate for performing the work has been made by this firm. Work performed at enclosed areas to be reinspected prior to closing areas. Chemical applications (including copper naphthenate) made by others may make areas hazardous and inaccessible for us to reinspect. More than one reinspection may be required. The price of each reinspection will not exceed the price of the original inspection report fee. All reinspections must be made within four(4) months of the original inspection report date.

NOTICE: Reports on this structure prepared by various registered companies should list the same findings (i.e. termite infestations, termite damage, fungus damage, etc.). However, recommendations to correct these findings may vary from company to company. You have a right to seek a second opinion from another company.

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THIS REPORT HAS BEEN SEPARATED TO DEFINE SECTION I AND SECTION II CONDITIONS EVIDENT ON THE DATE OF INSPECTION. SECTION I CONTAINS ITEMS WHERE THERE IS EVIDENCE OF ACTIVE INFESTATION, INFECTION OR CONDITIONS THAT HAVE RESULTED IN OR FROM INFESTATION OR INFECTION. SECTION II ITEMS ARE CONDITIONS DEEMED LIKELY TO LEAD TO INFESTATION OR INFECTION BUT WHERE NO VISIBLE EVIDENCE OF SUCH WAS FOUND. UNKNOWN FURTHER INSPECTION RECOMMENDED (UFIR) ITEMS ARE DEFINED AS RECOMMENDATIONS TO INSPECT AREA(S) WHICH DURING THE ORIGINAL INSPECTION DID NOT ALLOW THE INSPECTOR ACCESS TO COMPLETE THE INSPECTION AND CANNOT BE DEFINED AS SECTION I OR SECTION II.

1. **SUBTERRANEAN TERMITES.**

- 1A. (SECTION I) Evidence of subterranean termites noted at subarea soil.
RECOMMEND: Chemically treat soil at both sides of foundation and in the subarea crawl space at piers and pipes entering soil with TERMIDOR for the control of subterranean termites. At areas of paving, dime sized holes to be drilled to reach soil and patched after treatment. Accessible subterranean termite tubes in contact with the soil to be removed at areas of treatment. CASNER EXTERMINATING COMPANY will exercise all due caution, however, we assume no responsibility for damage which may result to pipes, conduits, ducts or other items concealed by concrete or paving.
NOTE: A two year warranty applies to the entire structure for the control of subterranean termites.
- 1B. (SECTION I) Cellulose debris noted at subarea.
RECOMMEND: Remove cellulose debris of a size which can be raked or larger from subarea soil and dispose of off the property.

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3. FUNGUS/DRYROT.

3A. (SECTION I) Fungus damage noted at rear patio sub framing.
RECOMMEND: Replace damaged wood with new materials and/or re-
enforce damaged areas with pressure treated
materials.

NOTE: Bid is for wood repairs and priming only.

3B. (SECTION I) Fungus damage noted at attached side storage trims.
RECOMMEND: Remove damaged wood and replace with new.

3C. (SECTION I) Fungus damage noted at subarea access doors.
RECOMMEND: Replace with new doors.

3D: (SECTION I) Surface fungus noted at the attached shed ceiling.
RECOMMEND: Scrape away fungus and apply a fungicide (BORA-
CARE) for the control of wood destroying fungus.

4. OTHER FINDINGS.

4A. (SECTION II) Water stains noted at sub frame under patio.
RECOMMEND: Maintain with periodic inspections.

4B: (SECTION II) Damp soil noted at the subarea below the patio
slab.
RECOMMEND: Install a moisture barrier as needed.

4C: (SECTION II) Cracks noted at the cement patio foundation.
RECOMMEND: Contact a local licensed contractor to inspect and
provide a report for repair as needed.

5. FURTHER INSPECTION.

5A. (UFIR) Subarea joist frame is limited due to insulation.
RECOMMEND: See page two of this inspection report concerning
such inaccessible areas.

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NOTICE TO OWNER/TENANT

CAUTION STATEMENT

1. PEST TO BE CONTROLLED:

- | | | | |
|------|-----------------------|-----|---------------------|
| (XX) | Drywood Termites | () | Fungus |
| (XX) | Subterranean Termites | () | Dampwood Termites |
| () | Wood Boring Beetles | () | Carpenter Ants/Bees |

2. PESTICIDES PROPOSED TO BE USED:

- | | | | |
|------|---------------|--------------------|---|
| (XX) | CHLOROPICRIN: | Active ingredient: | Chloropicrin, used as warning agent with FUMIGANTS. |
| (XX) | VIKANE GAS: | Active ingredient: | Sulfuryl Fluoride. |
| () | PREMISE 75: | Active ingredient: | Imidacloprid, 1-((6-Chloro-3-pyridinyl)methyl)-N-nitro-2-imidazolidinimine |
| () | DRIONE: | Active ingrediant: | Pyrethrins 1.00%, Piperonyl Butoxide, Technical 10.00% Amorphous Silica Gel 40.00 % |
| () | BORA-CARE: | Active ingredient: | Disodium Octaborate Tetrahydrate |
| (XX) | TERMIDOR: | Active ingredient: | Fipronil: 5-amino-1-(2,6-dichloro-4-(trifluoromethyl) phenyl)-4-((1,r,s)-(trifluoromethyl)sulfinyl)-1h-pyrazole-3-carbonitrile |
| () | ALTRISSET | Active ingredient: | Clorantraniliprole 3-bromo-n-(4-cloro-2-methyl-6(methylamino)carbynil(phenyl-1-(3-chloro-2-pyridinyl)-1h-pyrazole-5-carboxamide |

3. State law requires that you be given the following information:

CAUTION--PESTICIDES ARE TOXIC CHEMICALS. Structural Pest Control Companies are registered and regulated by the Structural Pest Control Board, and apply pesticides which are registered and approved for use by the California Department of Food and Agriculture and the United States Environmental Protection Agency. Registration is granted when the state finds that based on existing scientific evidence there are no appreciable risks if proper use conditions are followed or that the risks are outweighed by the benefits. The degree of risk depends upon the degree of exposure, so exposure should be minimized.

"If within 24 hours following application, you experience symptoms similar to common seasonal illness comparable to the flu, (headache, nausea, vomiting, cramps, weakness, blurred vision, pin-point pupils, tightness in the chest, labored breathing, sweating, watering of eyes, excessive salivating of mouth, muscle spasms, and coma) contact your physician or poison control center and your pest control company immediately."

FOR FURTHER INFORMATION CONTACT ANY OF THE FOLLOWING:

- CASNER EXTERMINATING COMPANY..... (831) 757-6000
 POISON CONTROL CENTER..... (800) 662-9886
 HEALTH QUESTIONS: MONTEREY COUNTY HEALTH DEPARTMENT..... (831) 755-4500
 SAN BENITO COUNTY HEALTH DEPARTMENT..... (831) 637-5367
 SANTA CLARA COUNTY HEALTH DEPARTMENT..... (408) 299-5822
 SANTA CRUZ COUNTY HEALTH DEPARTMENT..... (831) 454-2022
 APPLICATION INFO: MONTEREY COUNTY AGRICULTURAL COMMISSIONER. (831) 759-7325
 SAN BENITO COUNTY AGRICULTURAL COMMISSIONER. (831) 637-5344
 SANTA CLARA COUNTY AGRICULTURAL COMMISSIONER (408) 918-4600
SANTA CRUZ COUNTY AGRICULTURAL COMMISSIONER. (831) 763-8080

REGULATORY INFO: THE STRUCTURAL PEST CONTROL BOARD (800)737-8188

2005 Evergreen Street, Suite 1500
SACRAMENTO, CA 95815

PESTICIDES USED SUBJECT TO CHANGE WITH PRIOR NOTICE

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WORK ORDER AND PAYMENT AGREEMENT

SECTION I: 1A, 1B: \$1,900.00
 3A: \$10,500.00 3B: \$600.00, 3C: \$3,000.00 3D: \$900.00

SECTION II: 4A, 4B, 4C, 4D
 (NO BID AND/OR OTHER TRADES)

UFIR: 5A

INSPECTION FEE: \$250.00

Certification can be provided with the completion of all Section I items. Circle the items you wish completed by us and enter total here: \$ _____ INITIALS

NOTICE TO OWNER: Under the California Mechanic's Lien Law any structural pest control company which contracts to do work for you, laborer, any contractor, subcontractor, supplier or other person who helps to improve your property, but is not paid for his or her work or supplies, has a right to enforce a claim against your property. This means that after a court hearing, your property could be sold by a court officer and the proceeds of the sale used to satisfy the indebtedness. This can happen even if you have paid your structural pest control company in full if the subcontractor, laborers or suppliers remain unpaid.

TERMS: The undersigned customer does hereby agree to pay the sum of \$ _____ within 10 days of the issuance "Notice of Completion." Accounts 30 days past due are subject to a 1.5% monthly late charge, 18% per annum. Payment of said moneys through escrow is hereby guaranteed by the customer to be paid within the grace period of 10 days. The customer does hereby agree to pay to the contractor reasonable attorney fees and collection fees when the contractor must use legal recourse to collect said moneys whether a suit has been filed or not.

CONDITIONS

1. If during the course of the authorized work, any permits or changes are required or deemed necessary by the Building Department, it will be done at an additional cost.
2. If during the course of the authorized work, plumbing repairs are found to be necessary, this will be the responsibility of the owner, or at the owner's request.
3. Should, during the course of the authorized work on any of the above mentioned items, the damage be found to extend beyond the scope and perimeter of our report, a supplemental report and bid will be submitted covering the cost and direction for any such items. If a fumigation is required there is a 72 hour (excluding weekend and holidays) advance cancellation notice. If it is canceled after the 72 hour period there will be a \$200.00 cancellation fee.
5. When work is being performed, owner is to supply water and/or electricity if needed.
6. CASNER EXTERMINATING COMPANY will use reasonable care in the performance of work described herein and neither shall be responsible for damage to any plant, shrub or roof.
7. CASNER EXTERMINATING COMPANY appreciates this opportunity to service you and will do the above work to the very best of its ability. Unless otherwise stated, our work is finished ready for painting. We assume no responsibility for damage or infestations that cannot be reasonably detected without opening concealed timbers or areas.
8. CASNER EXTERMINATING COMPANY reserves the right to charge a cancellation fee of \$200.00 if notice of cancellation is received less than seventy-two (72) hours prior to commencement of work.
9. If all work is not authorized, prices are subject to review. Our minimum charge is \$500.00.

Submitted by: CASNER EXTERMINATING COMPANY
 11025 COMMERCIAL PARKWAY
 CASTROVILLE, CA 95012

I HAVE READ THE TERMS AND CONDITIONS OF THIS CONTRACT. PAYMENT WILL BE MADE AS OUTLINED ABOVE.

OWNER/AGENT SIGNATURE: _____
 OWNER/AGENT PRINT NAME: _____

DATE: _____
 PHONE: _____