

OFFICIAL GEORGIA WOOD INFESTATION INSPECTION REPORT

Company Name BACO Exterminating, LLC License No. 98448
 Address 6120 Northbelt Parkway, Ste A, Norcross, GA 30071
 Telephone No. 770-409-8882 Date of Issuance 2/7/07
 Seller Robert & Susan Kurtz Inspector Denise Harsaul
 File No. 104225 Purchaser(s) Phillip Soschinski

SCOPE OF INSPECTION

An inspection of the below listed structure(s) was performed by a qualified inspector employed by this firm to determine the presence or previous presence of an infestation of the listed organisms and is not intended to be a structural report. Neither is this a warranty as to absence of wood destroying organisms. **This report is subject to all conditions enumerated on the reverse side and is issued without warranty or guarantee except as provided in Rule 620-6-.03 of the Rules of the Georgia Structural Pest Control Act or subject to any treatment guarantee specified below.**

Main Structure Res
 Other Structures (Specify) Brookhaven Renaissance Lot 56
 Address of Structure(s) 2522 Brookline Cir, Atlanta, GA 30319

FINDINGS

Inspection Reveals Visible Evidence of:	Active Infestation		Previous Infestation	
	YES	NO	YES	NO
Subterranean Termites	---	X	---	X
Powder Post Beetles	---	X	---	X
Wood Boring Beetles	---	X	---	X
Dry Wood Termites	---	X	---	X
Wood Decaying Fungus (Not Molds and Mildews)	---	X	---	X

Were any areas of the structure obstructed or inaccessible? YES NO

If yes, list these areas (see Item 3 on reverse side of form).

Floors, walls, ceilings, coverings

0#637284

The following conditions conducive to infestation for wood destroying organisms were found at the time of inspection. The location of these conditions conducive to infestation are indicated on the attached diagram:

Remarks/Additional Findings:

This is a Retreat & Repair bond

NOTE: If visible evidence of active or previous infestation is reported it should be assumed that some degree of damage is present and a diagram identifying the structure(s) inspected and showing the location of such evidence must be attached to this form. Evaluation of damage and any corrective action should be performed by a qualified inspector in the building trade approved by the purchaser and lending agency.

TREATMENT

The above described structure(s) was treated by this company as follows:

Organism	Treatment Date	Contract Expiration	Type Treatment (Chemical Barrier, Bait, Wood Treatment)
Subterranean Termites	<u>8/05</u>	<u>8/07</u>	<u>Barrier</u>
Powder Post Beetles	---	---	---
Wood Boring Beetles	---	---	---
Dry Wood Termites	---	---	---
Wood Decaying Fungus	---	---	---

The present treatment warranty(ies) is:

- Transferable to any subsequent owner of the property upon payment of a fee on or before the expiration date.
- Not transferable to any subsequent owner of the property.
- The above structure(s) are not covered by a treatment contract with this company.

This structure has a current Exception Form II issued by this Company Yes No
 If Yes, a copy must be attached as part of this report.

CERTIFICATION

This is to certify that neither I, nor the company has had or contemplates having any interest in the property involved, nor is acting in any association with any party to the transaction.

Denise Harsaul
 Signature of Designated Certified Operator

 Signature of Purchaser or Legal Representative Acknowledging Receipt of Report

Copies to: Purchaser Mortgagee Realtor Seller

GEORGIA STRUCTURAL PEST CONTROL COMMISSION - EXCEPTION FORM II

For pre-construction treatments - This Form may only be completed by the property owner after the closing of a final loan
NOTICE TO PROPERTY OWNERS - DO NOT SIGN THIS DOCUMENT UNTIL YOU HAVE READ AND SIGNED "CONDITIONS GOVERNING THE USE OF THE FORM II". THESE "CONDITIONS" MUST BE CONSIDERED PART OF THIS DOCUMENT. YOU MUST RECEIVE A COPY OF THIS REPORT AND SUPPORTING GRAPH.

CONDITIONS GOVERNING THE USE OF THE FORM II

- 1. The Form II, Exception to the Minimum Treatment Standards, is intended to be used ONLY in situations where it is not possible or practical to meet the minimum treatment standards established by the Georgia Structural Pest Control Commission.
2. The Form II is not to be used to bypass the minimum treatment standards nor is it to be used to notify any agency of government that wood destroying organism work has been completed.
3. By signing this document the property owner acknowledges that the property identified will not receive a complete minimum treatment.
4. Each "no" must be explained in detail in the area provided on the front of this document as to specifically what areas of the structure do not meet the treatment standards and why it is not possible to meet these treatment standards.
5. All sections of this document must be filled out completely.

Name of Company BACO EXTERMINATING
Address of Company 6120 NORTHBELT PARKWAY SUITE A NORCROSS, GA. 30071
Owner of Property Robert & Susan KURTZ
Address of Structure Treated - Note: A separate Form II is required for each additional structure. Reproductions of the Form II for multiple structures is not acceptable.
2522 Brookline Cir Atlanta GA 30319
Phone Number of Property Owner 4-634-3335

Indicate with a check mark those items that do not meet the minimum treatment standards.

SECTION ONE - TERMITE CONTROL - Check one: Post Construction Pre Construction

Soil Barrier - Note: Items 1-10 pertain to post-construction. Only items #1, 2 and 6 can be used for both post-construction and pre-construction applications.

Table with 2 columns: Item description, YES/NO checkboxes. Includes items like 'All debris removed', 'Wooden contacts removed or insulated', etc.

Non Soil Pesticide, Device, Bait or Baiting System - Note: All items pertain to both post-construction and pre-construction applications.

Table with 2 columns: Item description, YES/NO checkboxes. Includes items like 'All debris removed', 'Wooden contacts removed', etc.

SECTION TWO - POWDER POST BEETLES

Table with 2 columns: Item description, YES/NO checkboxes. Includes items like 'Vapor barrier properly installed', 'Ventilation adequate'.

SECTION THREE - WOOD DESTROYING FUNGI

Table with 2 columns: Item description, YES/NO checkboxes. Includes items like 'Vapor barrier properly installed', 'Ventilation adequate'.

Explain in detail what areas of the structure do not meet treatment standards and why it is not possible to meet these treatment standards. Also, attach a graph indicating the area(s) that were not treated to minimum standards.

Void areas Earth filled Patches Contiguous Slabs / Slabs at or above grade and Monolithic Slabs not drilled for cosmetic reasons. foundation not adequately treated

Signature of Property Owner [Signature] Date 8/5/05
Signature of DCO [Signature] Date 8/5/05

Note: The DCO must sign this document within 21 days of the signature of the property owner. Failure to do so will render the Form II void.

